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FEBRUARY 28 1976 THE NEWSWEEKLY FOR PHARMACY

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Comment

Priority misplaced

For the National Health Service, the Governments' White Paper on Public Expenditure to 1979-80 (p289) spells a period of minimal growth—an overall 1½ per cent a year at current prices. Particularly severe will be the cut in capital expenditure so as to permit maintenance of services—as the White Paper put it, "In this situation of standstill any further improvement in services or the introduction of new ones will be possible only if corresponding savings are made elsewhere".

In such a climate, it is hard to see how the continued Government pre-occupation with health centres can be justified. The White Paper quotes health centre expansion as a specific example of effort to strengthen the role of the primary health care services, adding that they will "offer increased opportunities for co-operation and concerted action by multi-disciplinary teams working in specially designed premises". That sounds all very well for the professionals in the teams, but shows just where the politicians put the interests of the patient in their list of priorities.

Pharmacy's voice seems often to stand alone against the building of health centres to the exclusion of services more intimately in contact with the community. As our contributor F. P. Tenner wrote recently, patients do not complain about health centres—they dare not when there is no other doctor to go to except one in the same centre.

Last week, Sir Hugh Linstead—one of the profession's few ever to reach the House of Commons as an MP—warned that the health centre "foreshadows a new and developing distributive network for NHS medicines" (p305). But Sir Hugh offered hope as well: "The speed of change is capable of regulation. Political currents have been known to reverse themselves; in politics, water can run uphill".

Many general practice pharmacists will hope that if persuasive argument cannot reverse political thought on health centres, perhaps the nation's economic plight will

Fee—or tax?

There seems little doubt that the Government is currently planning a massive increase in product licence fees under the Medicines Act—something of the order of six-fold is said to be under discussion in some cases (see p288). It is an effort to "balance the books" in the face of the escalating cost of administering the Act—a balancing act to which the pharmaceutical industry rightly takes exception on the grounds that an element should be regarded as public spending on public safety.

But once balance is achieved, there is a danger that the percentage on turnover element might tempt a Chancellor to see this as a potential source of revenue for use for purposes other than medicines control. Another road fund licence in the making?

Six-fold increases in product licence fees?

The full extent of the proposed large rises in Medicines Act product licence fees for the year 1975-76 is now becoming clear.

Dr David Owen, Minister of State, Department of Health, has proposed that product licence fees under the Medicines Act be increased by 600 per cent to cover the full cost of the licensing system. Under his proposals, it appears that the major initial fee for a licence would go up from £300 to £1,800 for a new drug—for a product which includes the same constituents as one already marketed it would rise from £10 to £60—and then there would be an annual fee based on 0.25 per cent of turnover up to a maximum—thought to be £30,000. The proposals, which first came to light last summer (*C&D*, August 30, 1975, p256), are also understood to include safeguards for smaller companies.

The principle of the fees being fixed to cover licensing costs was first stated by Sir Keith Joseph in July 1971 when he was Secretary of State for Social Services. Sir Keith stated that the first fees paid under the Medicines Act were to be fixed at a level to bring in about £300,000 a year at a time when the full licensing costs were estimated to be about £500,000 a year. Objectives at future reviews, he said, would be to bring the receipts from fees into line with the full licensing costs—which are now running at £1.4m a year. The Department hope to raise £1m from the turnover provisions and the rest from the initial fees rise.

The Association of the British Pharmaceutical Industry and the Proprietary Association of Great Britain are, however, both opposed to the principle, of recovering costs from licence fees. They argue that some, if not all, the licensing costs should be provided out of public funds as the purpose is the protection of the public.

Size of increase criticised

Mr Patrick Jenkin, MP, tabled a Commons question about representations received to the proposals to increase the licence fees "by 500 per cent". He also asked if the Department would undertake "to phase the increase over not less than three years". Replying last week, Dr Owen said he had received representations from the main pharmaceutical industry associations to the effect that the whole or at least a major part of the cost of operating the licensing system should fall on general taxation and not on the industry. They had also commented on the size of the increase and raised objections to certain features of the proposed scale.

He continued that he had explained to them that the increase proposed was consistent with Sir Keith Joseph's July 1971 statement, and that the full costs of the licensing system was now £1.4m. "The size of the increase is due to the fact that, in

the period of nearly five years since the announcement, the fees have remained unaltered, while costs have increased. In the circumstances I do not consider that any further deferment would be justified."

Dr Owen added that "certain modifications" had been made to the proposed scales in the light of the comments received, and fees would in future be reviewed annually. Proposals the industry may have for further modifications could be considered in the course of consultation about the fees for 1976-77.

However, it is thought that the "modifications" do not in fact relate to the total amount of money being sought by the Department, but in adjustments to proposals for the different levels of fees. It is understood that Dr Owen has conceded in discussions that the industry is entitled to be involved in how the licensing scheme operates, as it is being asked to foot the bill, and talks are continuing on the method of that involvement.

Fees in other countries

Answering a further question from Mr Jenkin, Dr Owen said that the proposed fee increases did not distinguish between UK and foreign manufacturers, but related to the marketing of products in the UK. It was difficult to make comparisons

with the licensing systems of other countries as some relied wholly or mainly on a substantial initial fee, while in others annual fees were paid for products on the market. The information readily available which might not be fully up to date— included the following:

□ The US legislation does not make any general provision for the charging of fees, but certain products are subject to a certification system and relevant regulations provide for fees to be equal to the cost of operating the system.

□ France has a registration fee of Fr 2,000 (about £220).

□ A Bill before the West German parliament makes provision for an "admission fee" which could be as high as DM 240,000 (about £45,000) in particular cases; for drugs not falling in certain categories there is a maximum of DM 8,000 (about £1,500) but that may be doubled if the admission procedure gave rise to exceptionally high costs. No annual fees appear to be charged.

□ The general level of fees in Sweden appears to be substantially higher than in the UK; there is an application fee of KR 6,000 (about £660) for all products, and an annual fee of KR 3,300 (about £360) per product.

□ Switzerland has a registration fee of Sw Fr 250 (about £50) for each company, with registration renewed every three years for a fee of Sw Fr 200 (about £40).

□ The Union of Soviet Socialist Republics has not published a scale of fees.

In answer to further question from Mr Jenkins, Dr Owen reiterated the Government's reluctance to support repeal of Section 141 of the Patents Act (*C&D*, April 26, 1975, p573) "because they feel that the presence of the Section operates as a means of stimulating price competition and restraining exorbitant prices."

Irish VAT rates rise on March 1

Value added tax rates in the Republic of Ireland will go up next week, but the Irish Minister of Finance has refused to remove the tax from medicines.

On March 1, following the recent Budget, general rates for VAT go up from 6.75, and 19.5 per cent to 10 and 20 per cent respectively and there are adjustments to the higher 36.75 per cent rate for certain items. There is to be no reclassification of medicines; oral medicines remain zero rated, with most other medicines—including intravenous solutions—taking the 10 per cent rate while disinfectants and antiseptics fall into the 20 per cent rate category.

Prior to the Budget, the Irish Pharmaceutical Union pressed the Finance Minister, Mr Ritchie Ryan, to remove VAT from all medicines or at least remove it from prescriptions dispensed under the General Medical Services Scheme—the VAT recovered from such prescriptions is paid back to the Department of Health, and thence to the health boards who reimburse pharmacists for the tax. A resolution calling for removal of the tax from GMS prescription was passed by the Eastern Health Board last month (*C&D*, January 17, p62).

In a letter to Mr George Ledwith, secretary general, Irish Pharmaceutical Union,

Mr Ryan said the revenue commissioners felt that if a distinction was to be made between GMS and non-GMS prescriptions, "it would most likely add to administration costs for both pharmacists and the exchequer." Thus he felt he could not alter the present position.



International Chemical Co's sales manager, Stephen Boyes, presents Mrs Edna Maddern, Alton's Chemist, Leigham, Plymouth, with a £100 cheque—first prize in the "Celebration time" competition, held to celebrate a successful trading year for haemorrhoidal spray and Preparation H

Expenditure standstill for NHS

The cost of NHS family practitioner services is expected to grow at an average of 3.3 per cent a year over the period 1976-77 to 1979-80, according to the Government's White Paper published last week ("Public Expenditure to 1979-80", Cmnd 6393, HM Stationery Office, price £1.80). But overall expenditure on health and personal social services will increase at only 1½ per cent a year, with current expenditure up by 1.4 per cent a year for hospital and community services against 2 per cent for social services.

Capital expenditure is to be reduced to give priority to the maintenance of services and many new hospital and other developments will not proceed. But the section on family practitioner services records that the number of health centres will continue to rise "and this will offer increased opportunities for co-operation and concerted action by multi-disciplinary teams working in specially designed premises". This is seen as an example of continuing efforts to strengthen the role of the primary health care services within the NHS as a whole.

The number of prescriptions dispensed continues to rise at a rate about 9.5m a year, says the White Paper. The Secretary for Social Services has followed up the document by announcing a programme of re-allocation of capital and revenue resources between the NHS regions to help remedy imbalances in the distribution of health services.

Warning that ampicillin may reduce 'pill' efficacy

Professor P. D'Arcy, professor of pharmacy, Queen's University, Belfast, appeared on the front page of the *Daily Express* on February 20, warning that ampicillin could reduce the effectiveness of oral contraceptives.

The interaction was reported to him by a family planning doctor who discovered three cases of women on the "pill" becoming pregnant while taking the antibiotic. A spokesman from the Family Planning Association is quoted as saying "I don't think anyone need be over-alarmed but it is right they should be made aware of the possibility".

The newspaper quotes Beecham as denying that there was a general problem—ampicillin had been prescribed for 15 years and there were only a small number of cases in which it may have reduced the efficacy of an oral contraceptive. But Professor D'Arcy felt the reason why so few cases had been reported could be because it was not realised that another drug may be involved.

Mr Mason (left), Brooks and Warburton and Mr Jennions Fabergé, present Worcester Park pharmacist, Mr Yeo, with tickets for a week-end for two in Paris. His son, Nicholas, who works in his parents' pharmacy, won a retailer competition to launch the Aphrodisia 33 range and donated the prize to them



TPF reassurance on hair dyes

Recent statements in the Press and on television have presented a wholly misleading and unbalanced view of the safety of hair dyes, according to the Toilet Preparations Federation Ltd: "These statements, which have been presented in such an emotive manner, will have caused great concern to many users of hair colourants and it is therefore necessary to put matters in perspective".

The usual carcinogenicity tests in animals are time-consuming and costly so about 15 rapid screening methods, such as the Ames test, have been developed which indicate substances that need to be tested against higher animals. The Federation emphasises that such screening techniques do not indicate carcinogenicity but mutagenicity

so all substances positive by the Ames test must be tested on higher animals to establish possible carcinogenicity.

The Federation supports its views with comments from the World Health Organisation, US Food and Drug Administration and a statement from Dr David Owen, Minister for Health, in the House of Commons: "The Department's medical advisors have studied carefully the results of long term American tests on animals for cancer, which they considered to be far more relevant [than studies of mutagenic effects on bacteria], in which some of the dyes subject to mutagenicity testing have been used. So far, they have found no evidence that they produce cancer." Other long term studies were in progress.

Patients advise doctors on local health needs

Patients at the Aberdare health centre, mid-Glamorgan, have established a committee which meets their doctors every month to discuss ways of improving the primary care service.

The committee of 14 was set up at the invitation of the seven doctors at the centre and Dr Alastair Wilson, the group's senior doctor and president, Socialist Medical Association, pioneered the scheme. He believes that through this sort of participation patients will be able to raise the standards of their own family health. An education programme is being organised with the next lecture to be given by a general practitioner on drug abuse and misuse with particular reference to antibiotics and tranquillisers.

No pharmacists are on the committee as yet. Dr Wilson told *C&D* that he would like local pharmacists to operate in the health centre on a rota basis but they declined to do so when the centre opened three years ago.

Society's new premises ready in July?

July 31 is the current target date for completion of the Pharmaceutical Society's new headquarters building at Lambeth. The Society's North Metropolitan Branch, in whose area the Bloomsbury Square House

is sited, plans a farewell dinner at number 17 to mark the impending vacation of the premises. The president, Mr J. P. Bannerman, will be guest of honour.

Checking Bureau moves

The Central Checking Bureau is moving from Mallinson House on March 1 to Crown House, 47 Chase Road, London N14. The telephone number was not yet available as *C&D* went to press. The Pharmaceutical Services Negotiating Committee is due to move to Rickmansworth, Herts in the near future (see *C&D*, February 7, p157).

January pharmacy closures

The net loss of pharmacies to the Pharmaceutical Society's register in January was 18. In England 19 closed down, four of which were in London, and nine opened up. In Wales one and in Scotland two pharmacies were added to the register and closures were one and 10 respectively.

C&D Price Service

Due to a mechanical failure we regret we have been unable to include in the Addendum the price changes that have occurred during production of the List. These will be incorporated into the first supplement to the March Price List.

NPU branch threatens to boycott Testing Scheme

Members of Chesterfield Branch of the National Pharmaceutical Union are threatening to boycott the NHS Drug Testing Scheme from May 1 unless the "representative bodies of pharmacy" take steps to end the scheme's "selective nature" against chemist contractors (see letters, p308).

Advice for those exceeding VAT schemes' limits

Retailers using special VAT Schemes C or D—and whose taxable turnover in their first VAT year is likely to exceed prescribed turnover limits—are given guidance on what to do in *VAT News No 9* just issued by Customs and Excise.

The bulletin states that some traders had asked whether the limits for the schemes—£25,000 a year for Scheme C, £75,000 for D—are likely to be raised. "The answer is that the limits are not to be changed, but traders who are already using either Scheme C or Scheme D may go on using these schemes for the time being even if their turnover is likely to exceed the scheme limit", says the bulletin. The position is however to be reviewed after further experience.

The concession does not however apply to retailers who began to use either of the schemes "at a time when they were clearly not eligible to do so", or to retailers who exceed the scheme limits substantially as a result of a marked expansion in their business such as purchase of additional premises.

Health congress speakers

Speakers at the Royal Society of Health Congress pharmaceutical session, will be Professor P. F. D'Arcy, professor of pharmacy, Queen's University of Belfast, on "Iatrogenic disease: a hazard of multiple drug therapy" and Mr W. H. W. Inman, principal medical officer, Committee on Safety of Medicines, on "Recognition and investigation of the adverse effects of drugs." The chairman will be Mr Allen Aldington, chairman, pharmaceutical group, RSH, and the session will be held in the congress theatre restaurant, Winter Garden, Devonshire Park, Eastbourne, April 29 at 2.15 pm.

Levamisole found useful in children's colds

Levamisole could be useful in the treatment of winter colds in children, according to a group of Belgian doctors.

In *The Lancet* last week they reported a six-month trial in which 70 children with chronically relapsing mild-to-severe upper-respiratory tract infections took either a

placebo or at least 1.25mg per kg levamisole twice daily for two consecutive days every week. Levamisole significantly reduced the number, duration and severity of the infections.

The drug could act by improving the body's natural defences against infection. The authors suggest that it could enhance both local and systemic cell-mediated immunity and increase immunoglobulin production; increased levels of IgA, important in the control of respiratory infections, have been reported after prolonged administration of levamisole in elderly patients.

Centre provides aids to help smokers stop

A "Don't smoke" centre was opened in Reigate, Surrey, last week at which anti-smoking aids are on sale. The aids include Apal imitation cigarettes, Tabmint lozenges, MD4 special filters (see new products) and ASP mouthwash.

The centre is sponsored by the National Society of Non-smokers who are calling for a "no-smoking" day on Ash Wednesday (March 3) and have distributed some 20,000 leaflets in the area.

Risks from anaesthesia

Deaths related to anaesthesia fell by 70 per cent between 1961 (21 per 100,000 operations) and 1972 (less than four per 100,000 operations).

According to the latest Office of Health Economics booklet, "Anaesthesia" (£0.35), the number of operations performed during this period increased by 60 per cent. But in spite of recent advances in safety, anaesthesia still carries significant risks, particularly in the elderly and in emergency surgery.

Vaccine against Pseudomonas

Clinical trials are to begin soon on a British developed vaccine against Pseudomonas infections, Dr J. P. Bull, director, Medical Research Council industrial injuries and burns unit, told a Press conference on Wednesday.

While speaking about research into accidents and injuries, Dr Bull said the vaccine—developed in collaboration with Burroughs Wellcome—showed promise of being effective within 24 hours of administration. A large-scale trial is due to begin in India within the next few months and the vaccine will also be tried on selected patients in the Birmingham Accident Hospital where Dr Bull's unit is housed. Although developed for use in burns, the vaccine may also be useful in the treatment of eye infections but it has not been tried for that yet.



They were just packers and order assemblers at the LR/Sanitas distribution centre until they read about the "low sculpture" at the Tate Gallery. Now realising their daily work touches on exploring new frontiers of art form, three of them transformed 120 gross boxes of Durex Fiesta into a colourful copy of the American sculptor's "work of art". The Tate is believed to have paid around £4,000 for its much publicised exhibit—120 gross of Durex Fiesta would retail for less than a third of the price

Police alert for drug

Hertford police had to mount a publicity campaign recently after a doctor had failed to write a patient's address on the prescription form.

A codeine preparation instead of a cough mixture for an 11 week old baby was wrongly handed over from a Hertford pharmacy. The baby was found unharmed the following day after a relative had seen a police notice.

'Sponsored delegates' for management conference?

Companies in the pharmaceutical industry and distribution are being asked to sponsor two delegates to the Institute of Pharmacy Management International conference at Llandudno in April (see last week, p270) at a cost of £49 each. The Institute is anxious to secure an audience from the widest possible base because of the importance of the theme—"Management education of pharmacists in all their spheres of professional activity"—but recognises that many "interested parties" will be unable to attend for economic reasons.

Sponsored delegates will be named to the company concerned and asked to produce a report on the conference for their sponsors. Details of the scheme from Mr J. B. Thompson, 150 Charminster Road, Bournemouth BH8 8UU.

C&D Telex

Benn Brothers Ltd, publishers of *C&D*, are still receiving Telex messages on their old number. *C&D* advertisers and subscribers are reminded that the correct Telex number is 27844.

Westminster report

Talks with industry to cut over-prescribing

The Department of Health is having negotiations with the pharmaceutical industry designed to cut the amount of over-prescribing by greater education of doctors and of patients themselves, Dr David Owen Minister of State for Health, told Mr Michael Grylls on Tuesday.

Mr Michael Neubert had asked when the Secretary of State intended to introduce legislation on prescriptions, suggesting that "if the man in the street were picked up and shaken he would rattle". He called for action to control this "costly cascade of pills down the public gullet".

Mr Christopher Price said there was concern also over prescribing in hospitals, particularly for psychiatric purposes—the increase in the number of drugs prescribed and the prices charged by manufacturers should be watched closely. Dr Owen agreed but said it was a difficult question for doctors dealing with disturbed patients.

Mr John Farr emphasised the implications of the White Paper on public expenditure (see p289) and warned that unless the bill for prescribing drugs was limited in some way new hospital building would have to be cut because of lack of funds.

Mr E. Loyden spoke of "drug pushing" by proprietary manufacturers and recalled earlier demands from the Labour Party for the nationalisation of the drug industry. Dr Owen urged the questioner not to underestimate the effect of the voluntary price regulation scheme in reducing profits in the drug industry, which had reached unacceptable levels in the early 1960's.

Simpler VAT scheme?

A simplified VAT scheme is being discussed by representatives of the self-employed together with the Treasury and Department of Health. Mr Harold Wilson, Prime Minister, added in the Commons last week that Mrs Barbara Castle, Secretary for Social Services, was investigating a possible system of earnings-related National Insurance contributions and benefits for the self-employed.

Modified milks at cost plus 10 per cent from clinics

"I hope shortly to be able to announce arrangements to supply proprietary brands of modified milk free of charge to those entitled to free supplies", Mr Michael Meacher, Under-Secretary for Social Services, told Mrs Lynda Walker on Thursday.

Replying to Dr Gerard Vaughan, from the Opposition front bench, the Minister stated that consultations were being held with the manufacturers to make the necessary amendments to the Welfare Food Order 1975. He also referred to the need to continue arrangements which enabled

milk powder to be supplied at cost plus a 10 per cent handling charge which was "substantially below the commercial price". Modified milks were available on those terms even prior to the consultations.

Mr Robert Cryer said a reformulated National Dried Milk should be produced as a matter of urgency because the manufacturers of proprietary baby foods were "abusing their position by foisting on mothers proprietary baby foods so that the babies become hooked". Mr Meacher agreed about the "considerable price bargain"—National Dried Milk 20oz pack cost £0.20 while a proprietary modified brand 16oz pack cost £0.60-£0.85.

Price Code Order approved

Both Houses of Parliament last week approved the Counter Inflation (Price Code) (Amendment) Order 1976 (HM Stationery Office, SI No 71, £0.20). The Order amends the Price Code to continue investment relief between March and July and to facilitate some cross-subsidisation of products in the Price Check scheme.

Sunday trading extension?

A Bill to extend from 18 to 26 the number of Sundays in the year on which shops in holiday resorts may sell a list of scheduled

goods received an unopposed second reading in the House of Lords on Tuesday. The Government took a "neutral" position on the Bill, which amends the Shops Act to take account of the longer holiday season.

Statement 'soon' on ABPI discussions

Dr David Owen, Minister of State for Health, hopes to make a statement soon on talks he has been having with the Association of the British Pharmaceutical Industry over cutbacks on promotional activities. In reply to a question from Mr Laurie Pavitt last week, who asked if steps would be taken to limit the number of free drug samples to a maximum of six per doctor, he said samples were among the matters being discussed with the ABPI and he hoped to make a statement "shortly".

Lens solutions order

Dr Owen announced recently that a draft Order would be laid before Parliament shortly to enable the licensing provisions of the Medicines Act 1968 to be applied to contact lenses and solutions for use with them.

Secto celebrate 25 years of aerosols

More than 25 years use of aerosols was celebrated recently by Secto Co of Blackburn—one of the first British firms to develop the market.

Secto, a small private family business, were quick to realise the potential in aerosols which were used successfully for combating insects in tropical climates by troops in the second world war. After an extensive research and development programme, the company's chairman, Mr E. Woolley, his son Mr G. Woolley (managing director), and his colleague Mr F. H. Bradburn (technical director), launched their first British-manufactured Secto fly aerosol in October 1950.

As it was impossible to purchase a "ready made" aerosol filling plant the company made it themselves. Later a strong working relationship was fostered with Metal Box Ltd who had produced a new aerosol container using "soft" metals—up to 1948 "cast-iron" was compulsory.

Later in 1950 came the germicidal aerosol followed by the cellulose-type paint spray aerosol in traditional black only—extended later to include the Austin range of colours. The company then decided to rethink their marketing strategy and a new plan was drawn up to develop their scientific know-how where they had already established "grass roots"—the insecticide market, together with aerosol air fresheners, under the Astral brand name.

The word "push button" was commonly used to describe the operating unit. Sales were slow at first and the public naturally cautious, but once tried, people could see the results were dramatic. Whilst the formulations have improved over the years, the company attach great importance to high quality; that was demonstrated by Mr G. Woolley, managing director, who pressed the nozzle of an original 25 year-old aerosol which then worked as efficiently as ever!

Three innovators celebrating 25 years of aerosols (left to right): Mr F. H. Bradburn, technical director, Mr E. Woolley, chairman, and Mr G. Woolley, managing director, Secto Co, Blackburn



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NEW FORMULA 16 NATURAL PH BALANCE

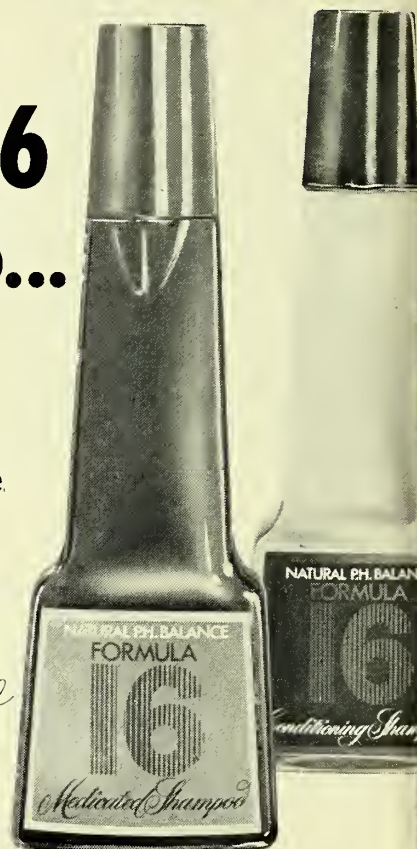
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People

Mr J. S. S. Tully, MPS, retires at the end of February after 23 years with May & Baker Ltd as medical representative in Edinburgh and neighbouring counties.

Mrs Margaret Puxon has been elected a fellow of the Royal College of Obstetricians and Gynaecologists. A practising barrister Mrs Puxon is the first woman Privy Council nominee to the Council of the Pharmaceutical Society. She qualified in medicine in 1941 and specialised in obstetrics and gynaecology.

Mr A. Wright, FPS, DBA, Editor of *C&D* and its associated publications, is additionally appointed Publisher with effect from March 1. **Mr James Lear**, who has been with *C&D* for six years, first as advertisement manager and more recently as Publisher, is transferring to the Benn Group's Tonbridge division to concentrate on his widening responsibilities there.

Miss Andrée Grenfell (Mrs Roy Warden) is resigning from the board of Elizabeth Arden Ltd, where she has been managing director for the past two years. On June 1, Miss Grenfell joins Glemby International to take up the appointments of president of the UK and European operation, and senior vice-president of the parent company in the United States. Glemby International is a leading hairdressing and beauty salon operation.

Deaths

McFadyen: On February 20, Mr Robert McFadyen, MPS, 53 Muirpark Park, Tranent, East Lothian. Mr McFadyen qualified in 1930.

Morrison: On February 14, Mr John Morrison, MPS, 27 Stirling Road, Larbert, Stirlingshire. Mr Morrison qualified in 1924.

Scott: On February 13, Mr Alexander Scott, MPS, 2 Corstorphine Park Gardens, Edinburgh. Mr Scott qualified in 1916.

News in brief

□ The Health Education Council has submitted a plan giving general practitioners financial incentive to perform health education, to the Government's subcommittee on preventive medicine. The HEC's director general, Mr Alistair Mackie, claims that only 300 family doctors are active in health education.

□ Miss Marianne Kenn, an assistant at Cross & Herbert's Horley Branch, received her prize for Agfa Gevaert Ltd's recent Christmas window competition from Mr R. Wright, Agfa's southern area sales manager, and not Mr P. Brazier, the company's retail sales manager, as erroneously stated last week (p237).

□ Turnover in pharmacy and optical departments of co-operative society stores was 4.5 per cent higher in December last year compared to December 1974, according to statistics compiled by the Co-operative Union Economic and Research Department. The figures show that pharmacy departments' turnover over the whole of 1975 was 15.3 per cent higher than in 1974.

Topical reflections

BY XRAYSER

Classification

There was further manifestation last week of the growing tendency to attach labels without due regard for accuracy. In pharmacy, that is regarded as quite unacceptable. I refer, of course, to the facile classification of "High Street chemists" and, equally facile, that in the item in a radio programme last week described by a certain Mr James Young as "a campaign to save the little chemist on the corner." I have never regarded myself as conveniently fitting either description and I must, therefore, be content to remain nondescript.

I sometimes question the value of such programmes, as I question the advisability of taking part in them. By their very nature they are bound to be insubstantial and inconclusive, for no matter how personable the presenter of such material may be, he cannot be knowledgeable on all the subjects he is called upon to discuss. In addition, there is invariably an eye on the clock, and no following discussion is other than surface.

The discussion alone, which I gather to have been by telephone, indicates how superficial the whole thing is, and I question, as I have suggested, the desirability of a prominent pharmacist taking part in such a programme, especially when the interviewer is given the opportunity of asking if chemists are not themselves to blame by turning themselves into "mini-supermarkets". That gave Mr D. N. Sharpe the opportunity of replying that if they were paid enough for dispensing they would be able to dispose of toiletries sales and spend their whole time doing the things they had been expensively trained for by the Government. That seems to be a double-edged argument, for the government may feel disposed to question providing an expensive training if the outcome is to be more "mini-supermarkets".

Mr Sharpe is, of course, right in saying that pharmacists should spend their time doing the things that they have been trained for, and that if they were paid enough for dispensing they would be able to dispose of toiletries sales. But there is a gulf between being *able* to do a thing and the doing of it. And pharmacy's commercial involvement is not diminishing.

Confusion

You report on p237 the approach to Mrs Shirley Williams (Secretary of State for Prices and Consumer Protection) by the Union of Shop, Distributive and Allied Workers in the matter of "money-off" flash packs. Lord Allen stated that "the best interest of shopper and staff would be served if there was a move towards the abolition of this sales gimmickery". He also said that many customers believed that "so much off" referred to the sale price marked on the article as there was no indication as to what was the recommended price. (A purchase I made the other day bore the legend—and I think the word "legend" meets the case—"at least 5p off recommended price". There being no recommended price, I was none the wiser in the matter of whether I had, in fact, got "at least".) One can go on hoping that sanity will return soon, for in these days of obvious financial stress, it is important that the purchaser should be able to assess value.

Sollicitous

I note that a "hangover pack" is being shown for hotel rooms, containing an eyeshade, cologne tissue, sticking plasters for the "shaky shaver", four Anadin tablets and two Alka-seltzer. A certain streamlining might have been attained by one of Jeeves's patent morning revivers which, despite the passing discomfort of having the top of the skull fly up to the ceiling and the eyes shoot out of their sockets and rebound from the opposite wall like racquet balls, gave almost instant relief.

PHILIPS REPORT

PHILIPS



A lot of people will be relieved to see we're advertising the Infraphil again this winter.

About this time of year, aches and pains catch up on people.

So naturally, the idea of buying a Philips Infraphil catches up too.

Which is why we're now brand leaders of a market worth over £2¼ million a year.

In February and March, we're running this advertisement. It'll be appearing in the Sun, Daily Mirror, Daily Mail, Daily Express and Sunday People.

From February 9th for eight weeks. So make sure you're all ready. That way, you'll end up with exactly the same as all your customers. No complaints.

Simply years ahead.



PHILIPS



Philips Infraphil offers you light relief from aches and pains.



The Philips Infraphil Health Lamp gives you a concentrated beam of infra-red light that penetrates the body tissues. It warms the tissues, dilating the blood vessels and stimulating blood circulation, thus helping to speed the natural healing process.

Sportsmen and coaches swear by it for treating muscular pain.

So when you ache, switch on the best light relief there is - Philips Infraphil.

Suggested selling price only £12.99 including VAT.

For further details about Philips Health Lamps, please write to Dept. SP,

Philips Electrical Ltd., Century House,
Shaftesbury Avenue, London WC2H 8AS.



Simply years ahead.



In 1976 will be looking

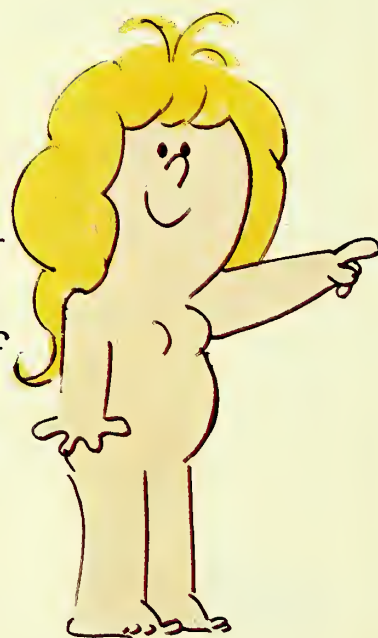


Better than ever with brand



Better than ever

because Mum has over 50% of the roll-on anti-perspirant deodorant market-by far the fastest growing sector of the market-and is selling almost **10 million** Mum packs every year-No wonder it's undisputed brand leader.



Better than ever because

MUM better than ever.



new eye catching packaging.

Better than ever

because once more the Mum girls are being used in both press and T.V. - Only this year they have the heaviest support ever in the history of the brand - **£400,000 nationally** from March to September.



Better than ever

because there are fabulous trade bonuses and new display material for you. Stock the full range and watch your profits grow.

MUM really works.

Mum is a registered trade mark. Authorised user:
 **Bristol-Myers**
 Bristol-Myers Co. Ltd., South Ruislip, Middlesex.

New products

Stop-smoking aids

Filter system from USA

Miles Laboratories have introduced a new system to help smokers who wish to stop smoking. Based on condensation filters the system, known as MD4, is designed to help a smoker to avoid the usual unpleasant withdrawal symptoms by gradual adjustment by the body to reduced nicotine intake. It can also offer safer smoking for people who cannot or do not wish to stop.

Tests conducted at Hazelton Laboratories, an independent research establishment with special expertise in this field, have shown that the system achieves reductions of up to 80 per cent in carbon monoxide, tar and nicotine intake using standard analyses, say the makers.

Carbon monoxide is now considered to be implicated as a cause of arteriosclerosis, ischaemic heart disease and foetal damage. There is also mounting evidence to suggest that standard filter tipped cigarettes offer little protection for the smoker against carbon monoxide, the makers claim.

Promotional expenditure for the launch is over £300,000, with large spaces in national consumer magazines and newspapers, plus information in selected medical journals. The system will be available exclusively through chemists.

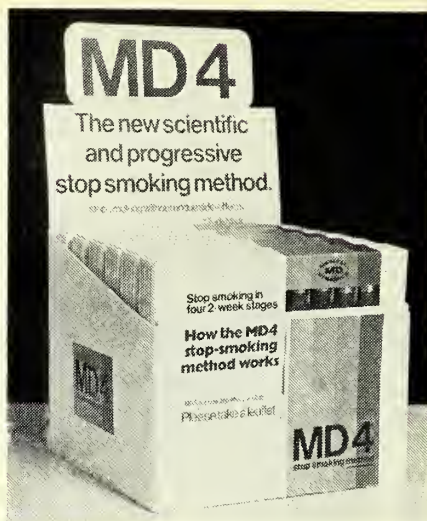
MD4—developed in the USA—consists of four condensation filters (£4.95 the set), each of which is used for two weeks before progressing to the next. Smoke is diluted with air entering through a small hole situated just behind the cigarette butt. The mixture then passes into a condensation chamber where the vapours circulate in a swirling motion, causing tar and nicotine droplets to coagulate into larger droplets until they are deposited into the chamber of the filter. In this way a proportion of tar and nicotine is filtered out of the smoke before it reaches the lungs of the smoker. The level of carbon monoxide is reduced by dilution through controlled mixing of smoke with air. The reductions progress from the first to the fourth filter until reductions of up to 80 per cent in the levels of air, nicotine and carbon monoxide are achieved during the final two weeks of the eight-week course (Miles Laboratories Ltd, Stoke Court, Stoke Poges, Bucks).

Cosmetics and toiletries

Gentle hair lightener

In May, Beecham are launching Softly Blonde by Hiltone (£0.69), a controllable hair-lightener with conditioning action. Formulated for women who wish to lighten their hair colour without a "brassy blonde" effect, Softly Blonde lightens by two shades with each application. To reinforce the conditioning action, a sachet of conditioning shampoo is included.

National advertising has been scheduled from May, with full colour pages in women's magazines. There are display



merchandisers, introductory trade bonuses and a competition for chemist's assistants will offer a first prize of £100 plus 25 second prizes of Braun hairstylers (Beecham Proprietaries, Beecham House, Brentford, Middlesex).

Sundries

Comfort solution and storage case

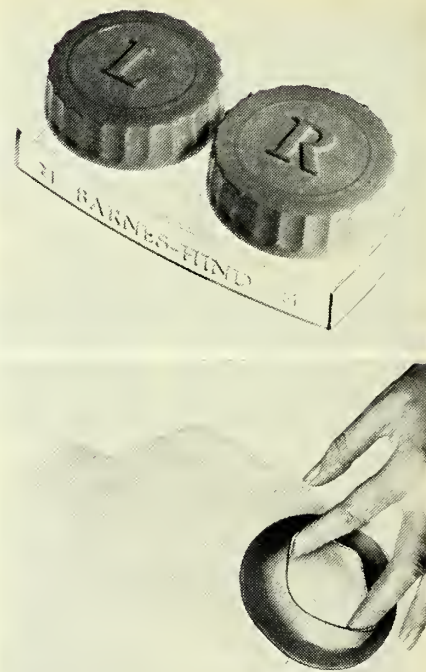
Barnes-Hind soft lens comfort drops is a solution for rewetting, conditioning and cleaning soft contact lenses while they are being worn (15ml, £0.90). It contains a nonionic surfactant system in a buffered isotonic vehicle with disodium edetate 0.1 per cent and thiomersal 0.004 per cent. Also available is a storage case (£1.00) for soft contact lenses (Barnes-Hind Ltd, Holbrook Street, Swindon, Wilts).

Jaquelle spring holdalls

Jaquelle have a range of travel holdalls (£1.25-£2.15) and cosmetic purses (£0.69-£0.99) for spring called Savanna. The floral-patterned cotton comes in three "dusty" shades of blue, green and pink with white waterproof lining. Their washable nylon range, Aztec—four holdalls (£1.29-£3.49) and three purses (£0.69-£0.85)—is available in mauve, blue or orange (Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland).

K-flex ostomy bags

Danmed Ltd are introducing a new range of Coloplast ostomy bags—K-flex drainable (50, £32.40 trade)—which have a resilient seal with an extra-wide karaya ring on a flexible backing. The seal fits snugly around the stoma, eliminating leaks and skin contamination. In trials, the integrity of the seal was maintained for



four to five days, often for much longer. The bags are intended for post-operative use for patients with skin problems or those unable to use adhesives. Available in 10mm and 40mm sizes, the bags can be worn with a special belt (10, £9.18 trade) which slots into a plastic flange round the seal (Danmed Ltd, Somersham Road, St Ives, Cambs PE17 4LD).

Photographic

Two 110 models from Kodak

Kodak Ltd are to introduce two new 110 cameras next month—the Instamatic model 130 (£15.72½) and Instamatic 230 (£21.30½)—which replace models 82 and 192.

Styled similar to the Tele-Instamatic cameras announced at the end of last year, the new models incorporate a new soft-touch shutter release to lessen the risk of camera shake, single-action film advance, and easier opening back. The flash cube socket has been repositioned and is now situated at the side of the cameras. Both models come complete with Kodacolor II film, Magicube and wrist strap, and Model 230 has a choice of two weather settings—bright or hazy sun—a bright line viewfinder and 25mm three element lens.

Two new ever-ready cases have also been announced—one (£2.02) for models 130, 230 and Tele-Instamatic 330 and the other (£3.98) for Tele-Instamatic model 430. Both cases are designed to open into hand grips to provide support during exposure as well as to act as portable camera stands. Instamatic carrying cases of the slip-in type will still be available.

Kodak are offering an extra 5 per cent discount on orders of five or more of certain camera models for delivery before April 16. The models involved are the two new Instamatic models and the Tele-Instamatic model 330. In another promotion the company are to change over to offering borderless prints for colour processing from all colour negative films printed on both glossy and silk papers (Kodak Ltd, Kodak House, Station Road, Hemel Hempstead, Herts).



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22



Who is no.1 in sunglasses?

Alfred Franks & Bartlett Co. Ltd.,
have been pioneers in sunglasses
in the U.K. for over 45 years.

Sales in 1975 produced over
£2,000,000 across the counter.

BARTEX POLARISED sunglasses
retail from £1.00 to £2.75 (plus VAT)
and are all backed with a
100% money back guarantee.

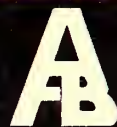
Get a copy of the **Bartex** 1976
polarised sunglasses brochure
and **check the value.**

The **Bartex** range is also
backed by powerful advertising
throughout the country—

On the buses

On the radio

and in the press.



Alfred Franks & Bartlett Co. Ltd.,
Bartex House, 167-185 Freston Road,
London W10 6TH.
Telephone: 01-960 0922/8.

We're telling everyone you've got what it takes to give up smoking.

Give up smoking the same way as you started. Gradually.

Remember your first cigarette? Chances are it made you feel sick, your eyes water, and your head spun. That was the first cigarette, the second one tasted better and soon you probably began to actually enjoy cigarettes—even to need them.

Most people start the smoking habit like this. Gradually. And we know from research that gradually is the best way to give it up. Suddenly stopping smoking, as for often results in unpleasant side effects such as irritability, nervousness and undue weight gain.

The MD4 stop smoking method is designed to eliminate these side effects, because your body has time to adjust gradually to the controlled reduction of nicotine intake.

The MD4 method is used over a period of eight weeks. During that time you actually continue to smoke normally, only you smoke through a series of condensation filters.

There are four condensation filters in a packet of MD4. Each one should be used for two weeks before moving on to the next. Before you inhale it, the smoke is first diluted with air entering through a small filter vent, which increases in size from the first to the fourth filter. The mixture then passes into the condensation chamber where the vapours condense in a swirling motion, causing the particles

of tar and nicotine to form into larger droplets until they are deposited in the chamber of the filter. The first filter reduces the tar and nicotine inhaled by 30%, the second by 60%, the third by 70%, and the fourth and final filter by 90%.

In these four easy stages, your body is able to adjust gradually to the reduced intake of tar and nicotine. This in turn means you should be able to take the fifth and final step with a minimum of willpower, and stop smoking completely.

Of course MD4 is an ideal way to smoke more safely. When cleaned regularly condensation filter number four can be used indefinitely to reduce tar and nicotine intake.

But the main objective of MD4 is to help you to give up smoking completely without side effects. If that is your aim, MD4 could be all the help you need.

MD4—Stop smoking without undue stress.

Available only through chemist outlets.



Until MD4 all you could recommend was willpower.

Smoking is not only a harmful habit, it is also a notoriously difficult one to break. Even when faced with health problems caused or aggravated by smoking, such as asthma, bronchitis and ischaemic heart disease, patients still find it hard to follow their doctor's advice to stop smoking.

In fact out of those who attempt to give up smoking, more than 70% fail. They fail because they have become addicted to the nicotine content of cigarettes, and, as with any form of addiction, when the nicotine intake is stopped suddenly, they frequently experience unpleasant withdrawal symptoms, which in turn force them to return to the original habit for relief.

The fear of these side effects often prevents would-be non-smokers from even attempting to give up. They can't face the thought of what they will have to go through in order to break the habit.

Now MILES, a leading company in the fields of health care and nutrition have introduced MD4, a new stop smoking method designed by a team of doctors to work gradually over a period of eight weeks.

Gradually is the key word here, because during the eight week course the body is given time to adjust to the reduced levels of tar, nicotine, and carbon monoxide intake.

With MD4 the patient continues to smoke, through a series of condensation filters. A course of MD4 consists of four filters. Each one should be used for two weeks before progressing to the next. Supervision is not required during the course as simple instructions are provided with the filters.

The smoke is first diluted with air entering through a small filter vent

The mixture then passes into a condensation chamber where the vapours condense in a swirling motion causing tar and nicotine droplets to coagulate into larger drops until they are deposited from the turbulent smoke in the chamber of the filter.

In this way a proportion of tar and nicotine is filtered out of the smoke before it reaches the lungs of the smoker. The first filter reduces the tar and nicotine inhaled by 30%, the second by 60%, the third by 70%, and the fourth and final filter by 90%. At the same time carbon monoxide in the inhaled smoke is reduced progressively until 90% reduction is achieved with filter number four.

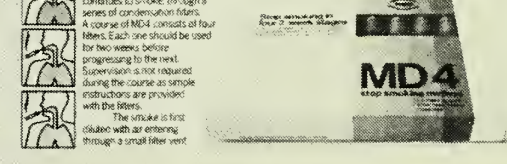
Then, with a minimum of willpower, the smoker should be able to take the fifth step—stop smoking, without experiencing undue side effects.

Of course MD4 can be extremely helpful to people who need to smoke more safely. When cleaned regularly filter number four can be used indefinitely to reduce the intake of tar, nicotine and carbon monoxide by 90%.

But the main aim of MD4 is to help people to give up smoking completely without the use of drugs, and without undue stress, which is why MD4 will bring new hope to those who suffer because they smoke.

MD4 is available now from retail chemists only. Recommended MD4—the safe solution to the smoking problem.

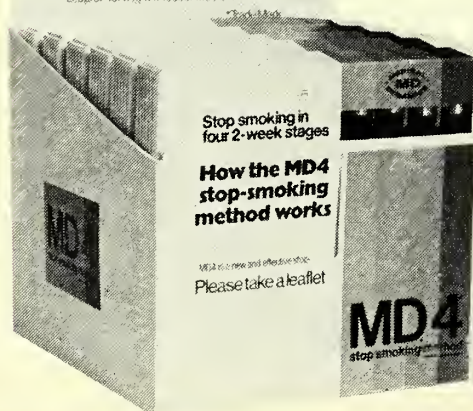
MILES Laboratories Ltd, Stoke Court, Slough, Slough SL2 4LY, England.



MD4

The new scientific and progressive stop smoking method.

stop smoking without undue side-effects



MD4 is a new stop-smoking method from Miles Laboratories with a potential market of 20 million smokers and a promotion budget of £300,000, which makes it the first ever anti-smoking product to be so heavily promoted.

MD4 is now a money spinner in the US and on the Continent, and here it has already been well received by the major chemist outlets.

Because it is not a drug, you can safely recommend MD4 to all your customers. It consists of a series of scientifically designed filters. An eight week course retails at £4.95 and provides a progressive reduction of tar, nicotine and carbon monoxide intake and is designed to minimise unpleasant withdrawal symptoms, usually associated with giving up cigarettes.

The launch period is now under way with intensive consumer advertising in Readers Digest, The Sunday Times and Observer Colour Magazines, Woman, Sunday Express, Daily Mail, TV Times, Evening Standard and Medical advertising in General Practitioner, World Medicine, British Journal of Hospital Medicine and Irish Medical Times. In addition, support for the product will be sustained through mailings to the medical profession, PR programmes for consumer and medical press.

Make sure you take full advantage of the MD4 point-of-sale material. Six packs are supplied in a display outer with leaflets. Counter cards and till stickers with leaflets are available from Miles. To reorder MD4 contact your usual wholesaler.



Miles Laboratories Ltd Stoke Court, Stoke Poges, Slough S42 4LY

Trade News

Close up relaunch

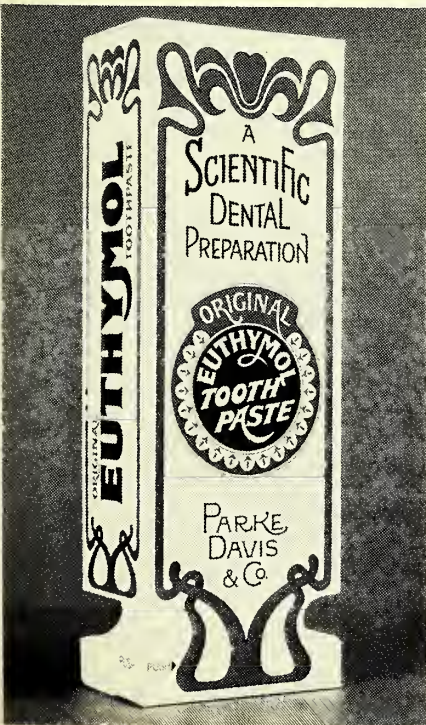
Elida Gibbs are relaunching Close-up toothpaste on March 1 with new fluoride formulation and flavours, advertising and packaging. The formulation contains sodium monofluorophosphate 0.8 per cent. Makers say "fluoride is now a universally accepted credential" to the consumer, demonstrated by fluoride brands' growing share—5 per cent in 1970 to over 90 per cent of the £38½m toothpaste market today.

From March 25 two commercials will be explaining the relaunch, at a cost of £1½m, from this year's £515,000 advertising budget. Deep-cut sampling packs are being used to ensure widespread trial at the following prices: standard size £0.12, large £0.19, economy £0.25 and "family" £0.31. Elida Gibbs Ltd, PO box 1DY, Portman Square, London W1, say this "most successful new product introduction in recent years" is being relaunched to "consolidate its position as a major brand".

Dilutants for reformulated Valium syrup

A reformulation of Valium syrup now facilitates its use for the diabetic patient,

One customer, so taken with this counter dispenser, bought the unit together with the two dozen tubes of Euthymol Original toothpaste it contained! Parke, Davis & Co, Usk Road, Pontypool, Gwent NP4 8TH, are offering special terms until the end of March to enable the retailer to offer the customer 6½p off



the syrup BP content having been replaced by sorbitol solution BPC. This change has produced a slight alternation in the taste.

Roche Products Ltd, PO box 8, Welwyn Garden City, Herts AL7 3AY, say that the new formulation may be diluted with syrup BP or sorbitol solution BPC for diabetics. The physical stability of the diluted syrup cannot then be guaranteed, although any sedimentation can usually be redispersed on shaking. Valium syrup should not be mixed with other drugs.

Lentard and Ultratard insulins

Lentard, Ultratard and Rapitard insulins of pro-insulin freed quality are replacing the conventional Lente Novo, Ultralente Novo and Rapitard from Martindale Pharmaceuticals Ltd, Chesham House, Chesham Close, Romford RM1 4JX, Essex. The immunogenic pro-insulin substances have been reduced by 99.9 per cent and are now less than 20 ppm. The concentration and effects are unchanged. They are available as 10ml vials of 40 and 80 units (Lentard—£1.10 and £1.87 trade respectively; Ultratard—£1.10, £1.87; Rapitard—£1.15, £1.95½).

Dorbanex 1000ml packs

From March 1, all orders for 500ml packs of Dorbanex liquid and Dorbanex Forte placed by wholesalers and hospitals will be filled by new 1000ml sizes (£3.22 and £4.85 trade respectively). Wholesalers will still be able to supply orders for 500ml packs for a limited period after the change-over. However, Riker Laboratories, PO box 27, 1 Morley Street, Loughborough, Leics, expect most wholesale stocks will be exhausted by the end of April.

Catarrh vaccine discontinued

Catarrh vaccine 5ml has been discontinued because manufacturers of the bulk raw material are unable to ensure continuity of supplies. Parke, Davis & Co, Usk Road, Pontypool, Gwent, say that customers whose orders have already been received will be advised if these orders cannot be filled from current stocks.

Through wholesalers

From March 1, Wellcome consumer division will distribute its over-the-counter products on a transfer order basis via the wholesaler of the customer's choice. Bonus terms for OTC packs will continue to be available on orders placed with Wellcome representatives. Wellcome consumer division, Crewe Hall, Crewe, Cheshire, say this change is in line with the distribution policies of the Wellcome and Calmic medical divisions and will improve the service to retail pharmacists. Orders for dispensing aids will be supplied direct.

Glaxo parcel terms

The qualifying value for Glaxo discount parcel terms to retail pharmacists is being increased from £25 to £50 at price to retailer, with effect from March 1.

Glaxo Laboratories Ltd, Greenford, Middlesex UB6 0HE, say the 5 per cent discount from price to retailer on qualifying parcels remains unchanged as do their other terms and conditions of sale.

Hedex repackaged

Sterling Health Products Surbiton, Surrey, have introduced blister packaging for the 16 tablet size of Hedex, bringing this pack



into line with the 24's and 40's. Each 16-tablet pack will include a leaflet giving the rationale behind the new packaging and instructions for removing the tablets from the blisters. All the packs have been redesigned to give greater shelf impact. The number of tablets is now marked on the front and each pack has the standard advertising slogan "powerful against headaches, gentle on your stomach". The Sterling Health logo is more prominent.

Brighter packs for Disprin

Disprin is now available in new brighter packaging in all four pack sizes. The red flash now highlights the number of tablets and red lettering saying "soluble strength" has been added under the Disprin roundel. The 24 tablet size comes in display outers of two dozen instead of one dozen packs from Reckitt & Colman pharmaceutical division, Dansom Lane, Hull HU8 7DS.

Hosiery campaign

An advertising campaign starts in March for the Elbeo range of support tights, stockings and maternity tights, including the Sheer Perfection brand for chemist outlets only. The distributors, Personal Supports Ltd, Stoney Street, Sutton in Ashfield, Nottingham NG17 4GL, have planned 30 second television commercials in six television areas during March and April—central Scotland, Midlands, Yorkshire, Tyne Tees, South West and Ulster. There will be advertising throughout March, April and May in *Woman*, *Woman's Weekly* and *Slimming* magazine.

Givenchy introduction offer

Parfums Givenchy Ltd, Riverdene Industrial Estate, Molesey Road, Hersham, Walton-on-Thames, Surrey, are offering 1oz atomisers of Le De Givenchy and L'Interdit to the consumer at £1.75. Packed in 24's—12 Le De Givenchy and 12 L'Interdit—the atomisers have a red display outer.

Cyclax promotions

Trial size Nature Pure milk of roses moisturiser by Cyclax Ltd, 35 West Road, London N1, can be purchased at £0.30 during March and April, and 50cc (usually £1.10) for £0.95 during April and May. Additional promotions during the later months are Moistura moisturiser 90g at the 50g price, £1.60, and Beauty Tint moisture cream foundation (usually £1.00) for £0.75.

More Trade News on p304

Trade news

Continued from p303

Miners promotions

A lime green wobbler is introducing Miners Great Shadow eye kit—six colours with double-edged applicator (£0.65). Gold and silver pearl is mixed with some of the colours to "bring out the best" in sets of green, blue or brown shades.

Disco red—a plain polish with a hint of pearl—is being added to the nail polish range (£0.22), and while stocks last both Big Build Up and All Weather mascaras are offered with "10p off".

Television advertising—for the first time—features new products and offers. Little Richard singing "She's got it" is a continuous theme and aims at a "mums to teenyboppers" audience. Myram Picker Ltd, Hook Rise, Kingston Bypass, Surbiton, Surrey, say the economic situation means older women are going for less expensive cosmetics. This year's promotions include colour Press advertising and a £100,000 budget over the past year is increased to £1¼ million.

Maybelline advertise

A three-week television campaign supporting Maybelline's latest lipstick range runs from March 8 in Midlands, Granada, Trident, Scottish, Harlech, Southern, Anglia and Westward areas, and from March 15, also in Thames, Ulster and Border. Plough (UK) Ltd, Penarth Street, London SE15, have designed the 30-second advertisement to emphasise "the smooth and creamy texture" of their lipsticks, and to reach 90 per cent of British women.

Natura offers

Four Natura products, from Dorothy Gray, 436 Essex Road, London N1, are available at least until the end of March at reduced prices. The offers are: lavender lotion with cucumber milk (£1.90) or with lemon cleansing grains (£1.55), savings of £1, and 30cc honey night cream (£0.75), a saving of £0.20.

Innox plastic bottles

Cleansing milk from Innox (England) Ltd, Innox House, 436 Essex Road, London N1, is now packaged in plastic. The white bottles (125cc, £0.80; 250cc, £1.30), have plastic plug necks that control release.

Supersoft extra 20 per cent

Supersoft hairspray, standard and medium size cans are being flashed "20 per cent extra free", for four variants, and offered to the trade on bonus terms. Reckitt Products, Reckitt House, Stoneferry Road, Hull HU8 8DD, say "Promotional research indicates that consumers view extra quantity packs most favourably when allied to reduced prices".

Durex and motor racing

Following last year's venture into Formula 5000 with the Durex Lola, LR/Sanitas are extending their involvement in motor

Point-of-sale material for the three Sans Soucis product groups being launched in the UK by Boma Products & Co, 28 Paris Avenue, Newcastle-under-Lyme, Staffs ST5 2RQ (last week p243)



racing with the sponsorship of a Surtees TS19 in this year's Formula One programme. The car is painted in white, maroon and gold and the Durex name is prominently displayed on the nose, wind-screen surround and sides. It will make its debut at the "Race of Champions" at Brands Hatch on March 14.

LR Industries, North Circular Road, London E4 8OA, explaining the sponsorship, refer to the inherent difficulties of advertising and promoting contraceptive products. "For this reason, it is felt that activities which allow exposure of the name in a more normal setting will be beneficial in increasing the awareness of effective products".

Unichem additional offer

Unichem members only March offer on selected fast selling lines, is run in conjunction with the regular monthly offers from March 8 to 20 and covers: Harmony hairspray, Brut 33 antiperspirant and splash-on lotion, Colgate dental cream, Vosene shampoo, pure Silvikrin, Kotex towels, Radox salts, Lil-lets, and Philips flashbulbs.

Bonus offers

French & Scott Ltd, 717 North Circular Road, London NW2. 36 free herb liquid shampoo sachets with every £15 order until March 26. Restricted to three bonus packs. Nivca Toiletries Ltd, Hook Rise South, Surbiton, Surrey KT6 7LU. Bonus on all sizes and colours of Special Softies baby pants, through representatives, March 3 for eight weeks.

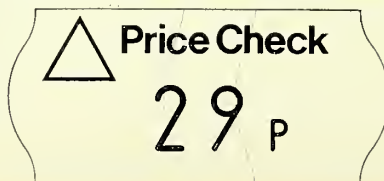
Correction

Richards & Appleby Ltd, Derby Street, Ormskirk, Lancs, state that sale of Carresin baby lotion is not restricted to pharmacies as indicated in C&D February 14 (p202).

Meto 'Price Check' labels

Red on white product pricing labels incorporating the Government's new "Price Check" triangle, have been introduced by Meto for use with their price marking machines. The labels enable "on product" promotion of the scheme and support the in-store merchandising kits supplied by the Government.

The 26 x 12mm, security cut, standard



adhesive labels are designed for use with the Meto 108 and 105 models and are supplied in rolls of 1,500. Stocks are immediately available from Dymo, Retail Systems Division, Victoria Road, Feltham, Middlesex.

Prescription specialities

L-HISTIDINE HYDROCHLORIDE capsules

Manufacturer Geistlich Sons Ltd, Newton Bank, Long Lane, Chester CH2 3QZ

Description Green/brown capsules containing L-histidine hydrochloride 200mg, equivalent to L-histidine base 148mg, as a white powder

Indications Dietary supplement in uraemia or chronic renal failure, where histidine deficiency is apparent or suspected. Also as a supplement to Nefranutin if necessary

Dosage Adults: 1 to 6 capsules every 24 hours. May be swallowed whole or opened and mixed with diet or Nefranutin

Storage At room temperature

Packs 100 capsules (£3.80 trade)

Issued March 14, 1976

on TV next week

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Glamorgan; E—Elmann; CI—Channel Island

Atrix: Sc, So, A, U, We, B, CI

Ayds: All except A, U, B, E

Bisks: All except E, CI

Caroline nappies: M

Cream Silk shampoo: All except U, E

Elnett: All areas

Harmony hairspray: All except U, E

J-cloths: Ln, So, A

Johnsons baby powder: All except E

Miners makeup: Ln, Lc, Y, NE

Nivea: All areas

Poise: All except Ln, Y, NE, E

SR toothpaste: All except U, E

Three Wishes soap: All except U, E

Vichy skin care: M

The Edwardian era: seeds of today's 'revolution'

Three dates at the end of King Edward VII's reign contained the seeds of a pharmaceutical revolution which is in full swing 70 years later, said Sir Hugh Linstead at the joint meeting of the Pharmaceutical Society and the British Society for the History of Pharmacy on February 17. The subject was "Edwardian pharmacy". Sir Hugh Linstead dealt with "Pharmaceutical legislation", and Mr A. Wright, the Editor, *Chemist & Druggist* dealt with "Its fabric and background".

Sir Hugh pointed out that in 1908 the Poisons and Pharmacy Act laid down statutory conditions under which corporate bodies could practise pharmacy. In 1909 Edward Harrison wrote, and the *British Medical Journal* published, "Secret remedies, what they cost and what they contain".

During 1910, the last year of the King's reign, Parliament was occupied with the Bill that became the National Health Insurance Act, 1911. The publication of "Secret remedies" in 1909, and "More secret remedies" in 1911, led directly to the appointment in 1912 of a Select Committee and indirectly to the fulfilment of its recommendations half a century later in the Medicines Act 1968. The third event, the passing of the National Health Insurance Act 1911, was of course the first step towards the NHS Act 1946.

The Poisons and Pharmacy Act of 1908 represented all that it was politically possible for pharmacists to achieve in the circumstances of the time. Nevertheless, it left the profession statutorily anchored to the sale of poisons and with no recognition of its role as the guardian of the public in the compounding, dispensing and supply of medicines. This was partially achieved by way of the National Health Insurance Act 1911, and the Pharmacy and Medicines Act 1933 at least got the practice of pharmacy adrift from the sale of poisons. The National Health Service Act 1948 and later the Medicines Act 1968 have taken the process about as far as current political thinking seemed ready to go.

Current situation

Looking at the current situation, Sir Hugh believed that "the pattern of distributive pharmacy, as between the big commercial pharmacy and the small neighbourhood pharmacy," is settling down and that large scale changes are unlikely to occur in that framework over the next ten years or so." Both groups must however expect a steady development of publicly controlled—"I use the vague phrase deliberately"—pharmacy developing along with the development of the health centre. "The direction of such development is clear; its speed and extent will depend largely upon the financial resources at the disposal of

local authorities and health authorities. Much of this development will also depend on political rather than social, economic or professional considerations."

The health centre foreshadowed a new and developing distributive network for National Health Service medicines and the elaborate district, area and regional organisation of hospital pharmacy was bound to develop increasing links with the FPC organisation and have a controlling influence in bringing the two into closer association: "This may be initially to ensure a fully distributed service around the country, but it will not stop there. The inspectorates of the Pharmaceutical Society and of the Department of Health and Social Security must inevitably find themselves working in increasingly close association." The all embracing machinery of licensing and inspection for medicines set up by the Medicines Act 1968 already gave the Department the decisive voice in determining what medicines should be available for treatment of the sick.

'Water can run uphill'

The direction therefore in which this current was bearing medicine and pharmacy and the manufacturing pharmaceutical industry was manifest. "It would be stupid not to recognise in it an element of evolution, of inevitability. But to say this is not to pronounce a sentence of doom on general practice pharmacy, or on the pharmaceutical industry as we know them today. The speed of change is capable of regulation. Political currents have been known to reverse themselves; in politics water can run uphill."

General practice pharmacy had substantial assets compared with the health centre. It could usually do the job more economically. It came nearer to the home. It offered a wider service of pharmaceutical needs. And the open door was more human than the open hatch.

Great statesmanship would be called for from pharmaceutical leaders over the next critical twenty years, both in the profession and in the industry in their relations with the State. "What are the sticking points at which one says, this far and no further?" asked Sir Hugh. He continued "There is one for all professions: that within the State's organisation, decisions and advice on professional matters must be in the hands of professional men. For medicine there is one other: that the ultimate responsibility for deciding what treatment is to be given to a patient must be the physician's alone. For our part, perhaps we in pharmacy can go no further than to insist that whenever a pharmaceutical operation is performed, there must be pharmaceutical supervision and responsibility".

In an earlier paper, Mr Wright said that many had seen Edward VII's reign as a mixture of operetta and French farce. It was a period of extremes, the rich and the very poor, and a time in which millions were still engaged in sweated labour living in slums. The West End of London and its East End were poles apart, linked by trade or commerce. In that link there were the middle classes which J. B. Priestley had discerned were at war with themselves. It was the class that produced the ideas and condemned them. It was the class that had many subdivisions within it, with a wide range of income and styles, covering those with large houses with six or seven servants to much smaller edifices.

During the 19th century London had expanded fantastically, and that expansion accelerated in the Edwardian period. Improvements in transport affected local fairs which had been the local centres of commerce, farmers and manufacturers had greater opportunities to sell to wider markets. Although the suburban market was not specifically rich, its members earning only a little more than the manual workers, the market was a wide one.

Maitland's "History and survey of London" indicated that in 1732 nearly a quarter of all the houses in London were shops or taverns selling some kind of food or drink, whilst Mrs Davis, in her "History of shopping", states it was clear that around that time there were many thousands of shops of one sort or another—many of them merely a ground floor of a house with a few goods in it, looked after by the housewife.

A large proportion of selling to the public was of course done over stalls, in sheds or lean-tos which sometimes were the only living quarters of the tenants. However, in the 1850's plate glass began to be used more to replace small panes of ordinary glass and the bow windows that thrust "each beyond his neighbour". Adequate street lighting even in thoroughfares was a rarity until the 19th century; gas lighting was introduced in London about 1807 and by the Edwardian period was in general use as an illuminant. Before the century ended, electricity was supplanting gas. Windows, glass and gas together helped change the shopping environment.

Pharmacy hours

Pharmacies and other shops opened from 8 am to 9, 10 or 11 pm, and in some cases were open on Sundays. However, not only were there developments in the structure of shops but there were also new types of organisations to run them, and the first co-operative shop opened in Rochdale in 1844, and was followed by the Wholesale Society to supply co-operatives unable to buy in bulk due to lack of capital or expertise. The co-operatives were probably the first to run successfully branch shops, and thus could be said to be among the first multiples.

Mr Wright showed a number of slides, most of which had been prepared from the "Pharmacies in Britain" series in *Chemist & Druggist*. They were drawings by either John Baker or Geoffrey Fletcher done around 1954-59 of pharmacies that were in existence in the Edwardian period when shopping began to move from the single owner to the complex it is today.

Use of a high-calorie supplement in exercise

by M. A. Ford, AIFST, research and development department, Beecham Products, Coleford, Glous

The history of sport is riddled with mythology about the value of particular diets for the athlete. Herb Elliot, the Australian miler, used such foods as raw rolled oats, walnuts and carrots, while Angelo Parisi, the international judoka, ate gallons of ice cream, in addition to grand helpings of steak and chips.

The earliest athlete known to have trained on a special diet was Charmis of Sparta; he is reputed to have eaten dried figs before winning the 200 yard race in the Olympic Games of 668 BC. Whether it was the sugar in the fruit or the well known alternative effect of figs that brought him success is not recorded!

The subject has advanced little in the intervening centuries but in the past few years there has been a more systematic approach to establish the relationship between nutrition and sporting performance. The experience gained by the research and development department of Beecham Products in the development of glucose syrup-based products—such as Lucozade and Hycal—suggested that in glucose syrup there was a valuable source of energy well suited to meet the special needs of athletes.

Energy supply

Prior to development of the product specifically aimed at athletes, consideration was given to their dietary requirements. Theoretically energy can be supplied by protein, fat and carbohydrate but it is well established that protein is not used as a fuel to any appreciable extent when sufficient calories are supplied from other dietary sources; indeed the use of protein as a fuel is no higher after heavy muscular exercise than during rest¹.

Even after the energy stores in the body have been depleted, continued exercise does not cause a significant increase in the amount of protein metabolised. The major role of protein in the diet is for the construction and preservation of body tissues. Thus the choice is actually limited to fat or carbohydrate.

The amount of fat used during exercise depends upon diet, work intensity, duration of the exercise and fitness of the athlete. At low work intensities, when metabolic processes are largely aerobic, about 50-60 per cent of the energy is supplied by fat. As the work load increases anaerobic processes supervene and there is an increased utilisation of carbohydrates. The body stores carbohydrate as glycogen in the muscles and liver and it is these stores that provide the first reserves of energy during muscular exercise.

During exercise the breakdown of glycogen in muscle tissue proceeds in three stages. Breakdown is very rapid in the initial phase, followed by a period of decreased glycogen consumption due to

adaptation of the metabolic processes to the work load; in the third period there is a relative lack of muscle glycogen and the muscle compensates for this by an increased uptake of blood glucose. Thus a restricted glycogen store or low circulating blood sugar are the limiting factors in vigorous exercise.

Scandinavian scientists have demonstrated^{1,2} that a dietary manipulation known as carbohydrate loading (or the Saltin-Hermansen diet) can increase the glycogen stores in the muscles and improve performance in endurance events exceeding 30-60 minutes. In simple terms, this diet requires the individual to exercise to exhaustion daily one week in advance of a competition to empty the glycogen stores; then, as the competition nears, the diet is changed to a high carbohydrate intake to supercharge the glycogen reserves.

Oxygen take-up affected

The use of such a diet is not without drawbacks, however. Glycogen retains water and both may be deposited in the muscles to such an extent that there is a feeling of heaviness. The resulting weight increase due to water retention may reduce the ability of the athlete to take up oxygen maximally and this type of diet has been reported to produce cardiac pain and electrocardiographic abnormalities in the older runner³.

In the light of the preceding considerations, there is a demonstrable need for a high calorie product which will replace depleted energy stores without resort to drastic dietary regimes. The use of Dynamo has been found to improve athletic performance both in the laboratory^{4,5} and in field studies including canoeing⁶, badminton⁷ and soccer⁸. But in addition to the provision of fuel for muscles, carbohydrate

significantly increases the concentration of the amino-acid tryptophan and the neurotransmitter serotonin in the brain⁹ as a result of insulin secretion after the consumption of a glucose load.

The significance of this finding is underlined by recent reports of the inter-relationship between carbohydrate metabolism and performance error. In a preliminary study of the rate of accidents in the hot areas of an iron foundry, it was revealed that more accidents occurred in the pre-morning break period than in the post-break period due, it was suggested, to inadequate nutrition before coming to work. Subsequently 58 men in the hot areas drank either Dynamo or a placebo in the early morning before commencing work; the treatments were reversed such that each subject acted as his own control, experiencing a four to five week period on each treatment.

Significantly fewer accidents occurred using Dynamo than when the subjects drank the placebo and the effect was predominantly during the morning work period¹⁰. It appears that there may be a causative relationship between inadequate availability of carbohydrate from transient malnutrition and performance error. Other workers have also drawn attention to the correlation between hypoglycaemia and impaired performance in connection with motorway accidents¹¹ and pilot fatigue¹² when errors of judgment can be made, resulting in the development of a devastating chain of events.

Fluid loss

Physical exertion usually results in an increase in body heat production and dissipation of this heat is partially accomplished by evaporation of sweat. The loss of fluid no greater than 3 per cent of the total body fluid has been shown to impair



In the foundry trial, a volunteer wears a Kofranyi-Michaelis sampler to measure energy expenditure



Canoeing trial: a blood sample is taken at the end of each lap

performance, greater losses leading to heat stroke. However, while the replacement of these fluid losses is vital, it is important that the rate should not exceed one litre per hour to avoid the risk of gastric overfilling.

As well as the fluid that is lost in sweat, large amounts of minerals (electrolytes) are also lost; loss of sodium in sweat is known to produce thirst, apathy, headaches and muscle cramps, and relief can be brought about by the administration of salt.

An effective product should combine the advantages of a high calorie intake with a low fluid volume to minimise gastric discomfort, to which are added electrolytes to aid the replacement of those lost in sweat. Dynamo is such a product.

Sweetness factor

From the outset it was realised that the provision of a high concentration of carbohydrate in a palatable drink is not possible using the common carbohydrates. If the sweetness factors of the usual carbohydrates are compared, assigning the value of 100 to sucrose, then glucose (dextrose) is about 70 on this scale, fructose (fruit sugar) 130. All three are too sweet to be used in the high concentration demanded for Dynamo.

However, there is another carbohydrate, glucose syrup, available to the formulator which is much less sweet (sweetness factor about 30) than sucrose, allowing the preparation of a palatable, high calorie drink.

Glucose syrup is not simply a concentrated solution of glucose but a mixture of glucose and other more complex sugars, all of which are polymers of glucose, produced by the hydrolysis of starch. The conditions of hydrolysis determine the spectrum of sugars resulting and glucose syrups can be made to suit the functional properties required by the formulator. Studies have shown that glucose syrup, which is eventually converted to glucose in the body, promotes as rapid a rise in blood glucose as does glucose itself¹³.

Dynamo has been subjected to a more thorough evaluation than any other ergogenic sports aid and to date some fifteen papers have been published in scientific journals demonstrating its value

as a high energy supplement for sportsmen and others.

The excessive use of carbohydrates is often blamed, with some justification, for the ills that befall man in "civilised" societies, but these Dynamo studies and trials by other workers are causing scientists to reconsider the hitherto underestimated, but apparently vital role that carbohydrates play in human nutrition.

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Letters

Supplies for addicts: the pharmacist's viewpoint

As superintendent of a company which participates in the arrangements for dispensing for addicts, I was naturally interested in the letter written by Moona French-Hodges, quoted in your "Comment" column last week (p231). The number of addicts we have dealt with has not been large, and for the past twelve months we have had no one "on our books", so to speak—possibly because we are situated at some distance from the nearest clinic.

Despite the fact that we are not, therefore, *au courant* with immediate problems, and whilst I agree in principle with much that the deputy director of ROMA writes, (and in particular with the opening sentence), perhaps I may be allowed to put forward the pharmacist's point of view?

In reply to the first question raised, the answer is quite simple. Pharmacists are not required as part of their Terms of Service under the NHS to participate in the scheme. Perhaps the answer would be to compel all pharmacies to belong, but this in itself smacks of bureaucratic control and might lead to resentment. I myself am inclined to the view that voluntary participation is preferable. A pharmacy can always opt out of the scheme.

Now let us take point two. Certainly the of ill-kempt, aggressive and abusive addicts, particularly when their need is so great that they will inject themselves in the shop or adjacent doorways, has a deterrent effect upon other customers: by "deterrent" in this case, I mean that very often they take their custom elsewhere. Attempts to explain to such people what one is hoping to achieve are not always met with a sympathetic response—indeed it can, on occasion, be downright hostile. The consequence can be loss of business which, for a small pharmacy in the present economic climate, can be sufficient to decide the proprietor to withdraw from the scheme or risk the consequences.

I have always tried to be as helpful as possible in my dealings with addicts, but my efforts have often been vitiated by both addicts and prescribers. Patients who do not arrive on time, or in person, to

collect their daily supplies pose problems, and I am not losing sight of the fact that the heroin addict seems often to have little sense of time. Shall the pharmacist stay behind after hours to await the late arrival of the person concerned? Can he, in all fairness, expect another member of his staff to remain with him to witness that drugs have been handed over? Prescribers too, are not infallible, and the arrival of an incorrectly written prescription, not as infrequent an occurrence as one would wish, can lead to aggravating delays; as the replacement prescription should ideally be sent by post, not always the most reliable of methods today.

The third point raised is, as the writer says, of no direct concern to the pharmacist. However, I know from personal observation that many of my addicts have habitually turned up in taxis to collect their drugs. This suggests that they are being over-subsidised by someone, or, more sinister, that their daily needs have been over-estimated and that it has become profitable to sell the excess on the black market.

I do not blame the clinics for this: the problem is extremely complex, the long-term addict very often cunning and plausible. The pity is that very often in these cases the money obtained from the sale of excess tablets, or in some cases from the the daily minimum, is spent on the purchase of larger amounts of illegal supplies which are at best diluted and at worst downright lethal.

Problems transferred?

I reiterate that the problem is a difficult one and I do not pretend to know the answer. I doubt if anyone does. Perhaps the addiction centres themselves could issue the drugs; but I can see difficulties in such a system, not the least of which would be that the clinics would themselves become subject to the break-ins which at present plague the private pharmacy.

We should however be grateful that in this country we have attempted to tackle the problem, however inadequately, in a more humane fashion than obtains for instance, in the USA. There, the incidence of addiction to "hard" drugs is so great (and I am sure that researchers in this country are well aware of the statistics) that a large proportion of all robberies and "muggings" serve only to provide the means for an addict to obtain supplies. At least, so far, we have been spared that.

John F. Reynolds
London W9

Letters

Continued from p307

Pre-registration posts

In his comments in your issue of February 21, Xrayser referred to a statement in the report of the February meeting of the Society's Council that if the present rate of intake into schools of pharmacy persisted there would soon be 200 graduates unable to find posts. This was, however, an opinion expressed at the hospital practice subcommittee. The Education Committee considered this matter recently and while noting that by 1977 an additional 200 graduates would be seeking such positions, it was considered that in all probability sufficient places would be available.

There is an indication that there might be fewer opportunities in the hospital services during the next few years but if graduates are prepared to travel to different parts of the country it is hoped that there will be sufficient general practice places available. The largest general practice employer stated last year that the company had more places available than ever before. A further encouragement to general practice employers will be given when the Pharmaceutical Services Negotiating Committee completes its negotiations with the Department on the grant which is to be paid directly to such employers for this purpose.

J. E. Balmford

Chairman of the Education Committee
Pharmaceutical Society of Great Britain

Advertising

The recent report of the January meeting of the Society's Council (C&D, February 14, p192) raises the question of whether there is any harmony at all between Messrs Boots, the Council and the profession to which both parties belong.

The dilemma created by Boots' involvement in both retailing and manufacturing is clear; nonetheless, to an ordinary NPU member like me, it seems that Boots must be finding some amusement in playing cat and mouse with Council and laughing all the way to the bank as a result. They flatter Council by coming to them "for guidance", but had evidently reached their conclusions before the meeting began: "as long as we can advertise medicines".

It also appears that Council have meekly accepted the statement that "the use of such phrases as 'available from all chemists' . . . was not thought to be practicable" without even reminding Boots that ICM Ltd is required to perform the "impracticable" by advertising its promotions without telling its customers at what type of outlet they may be found.

But the biggest misrepresentation comes in the statement from Mr Ross that "Boots had not used the title 'Boots the Chemist' for some considerable period, and that had helped the Council in its advertising

policy." Mr Ross, it seems, did not even qualify that statement with the words "in its advertising" (though that was implied) but, even had he done so, the Concise Oxford Dictionary defines "to advertise" as "to make generally known". I enclose herewith photocopies of the front of a bag used for dispensed medicines bearing the words "dispensed by Boots the Chemists" and two dispensary labels bearing the same title, which came from medicines dispensed two days after the meeting at which Mr Ross made that statement.

To see Boots getting away with this is bad enough; to read that Council can or will do nothing about it is worse.

R. Hazlehurst
Bradford 9, Yorks

Pharmacists ill-equipped?

While reading my husband's copy of *Chemist and Druggist*, February 7, I was somewhat alarmed by your large section on aids for the handicapped, suggesting pharmacists should be highly involved.

Too often people are unaware of the skills necessary to advise handicapped people on suitable aids. Unsuitable aids, however kindly intended, can do a great deal of damage. It has taken me three years' training to acquire the basic skills—the time to train a state registered occupational therapist.

My husband certainly feels that his pharmacy training has not equipped him to advise handicapped people on aids. He refers any inquirers to their local social services department, telling them to ask for the advice of a qualified occupational therapist. Any necessary equipment after assessment is usually provided either free, or at a minimal charge to the handicapped person. This saves making mistakes which are expensive on the pocket and can be detrimental to the condition.

Jennifer M. Evans
Oakham, Leics

Mr E. Hazlehurst and his son Dick, pharmacists who specialise in selling these aids and who were interviewed for the *feature*, write: "In the introduction, the Minister for the Disabled drew a very clear distinction between the roles of the pharmacist and of the different specialists. Mrs Evans appears to refer to such equipment as artificial limbs, calipers and surgical appliances needing specialist recommendation. In this context we agree with her wholeheartedly. However, the Minister himself feels that pharmacists 'can help . . . in the field of the simpler aids . . . which can make a great deal of difference to a disabled person trying to cope with the problems of everyday living.' We are sure he is right."

Isoxsuprine in pregnancy

I note that you have quoted (January 17, p62) part of an article from *Mims Magazine* by Professor Illingworth of the University of Sheffield, and have listed a series of drugs which should be avoided in pregnancy wherever possible.

We have informed both Professor Illingworth and the magazine that we are extremely distressed that isoxsuprine should have been placed in this list of drugs, as it has a very positive use in premature labour, and has in no way been implicated

in causing the side effect of respiratory distress syndrome which Professor Illingworth has claimed in his article.

A letter in *The Lancet* of July 28, 1973, p198, shows very clearly the reverse. Far from causing respiratory distress syndrome, isoxsuprine would appear to prevent it in those premature babies whose mothers have been treated with the drug before the birth.

T. C. G. Smith, MB, ChB
Medical director
Duphar Laboratories Ltd

Testing Scheme threat

The Drug Testing Scheme re-introduced on January 1, 1976, applies only to chemist contractors and not to other contractors, for example, appliance contractors or dispensing doctors. This scheme has been imposed against the will of our elected representatives on the Derbyshire Area Chemist Contractors Committee.

The Chesterfield and District Branch of the National Pharmaceutical Union feel strongly that this total disregard for equality and justice displayed by the Department of Health and Social Security can no longer be tolerated.

The following resolution was unanimously passed at a special general meeting on January 27: "That the present Drug Testing Scheme so blatantly discriminates against chemist contractors that unless the representative bodies of pharmacy take steps to end the selective nature of the scheme by May 1 the members of the Chesterfield and District Branch of the NPU will feel obliged to take unilateral action and refuse to allow test samples to be taken."

We feel that any trade union or professional body would not allow its members to be discriminated against in this way.

P. S. Armstrong
Secretary, Chesterfield and
District Branch, NPU

Price Check

I do not often write to the papers (indeed, seldom more than two or three times in any one week), but I feel that I must protest against HMG spending £1 million or so on the Price Check gimmick. This incomprehensible scheme, totally immaterial to our economic problems, has obviously been dreamed up by back-room boys who are so "thick" that they would have great difficulty in solving a one-piece jig-saw puzzle; probably the very same "experts" who were responsible for the abolition of RPM, for VAT, for decimalisation and for metricalisation.

Raymond Hutchinson
Harrow Weald, Middlesex

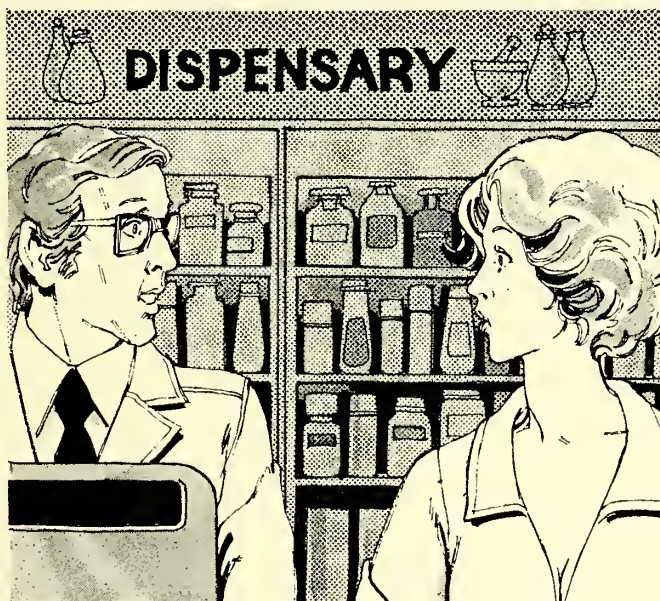
Giro details needed

I would be grateful for the hospitality of your columns to make a request to manufacturers, wholesalers and other suppliers of merchandise to print on statements and invoices the required details for remitting by means of Bank Giro Credit. The three details required are: Code number, name and address of the bank, account number.

I find that remittances by Bank Giro Credit used in addition to the NPU Clearing House can take care of all my payments with no fuss or bother and can save time and money.

Frank Brean
London SE15

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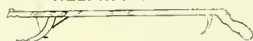
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Company News

Dixons' bid for Westons is 'on target'

Dixons Photographic's bid for Weston Pharmaceuticals is "well on target for a 100 per cent take-over", a spokesman told C&D on Tuesday. Already Dixons have acceptances in respect of some 73 per cent of Weston shares and the offer is now unconditional. When Dixons have secured 90 per cent holding they intend to apply for full control under the provisions of the Companies Act.

The cash alternative closed on Wednesday but, being much less attractive than the shares offer, had been accepted by only 1 per cent of Weston shareholders (apart from the London & Counties liquidator). The share option will remain open and Dixons now expect to receive acceptances at an increasing rate.

Sales volume and profits fall for ICI

Imperial Chemical Industries Ltd suffered a marked reduction in sales volume last year, according to a report issued by the company last week.

Group sales for 1975 are £3,099m, a rise of 5 per cent on 1974, with UK sales up 9 per cent, from £1,199m to £1,311m, and overseas sales up 2 per cent to £1,788m. However, UK exports dropped to £586m (£636m in 1974), and profit figures include a credit of £29m from the conversion into sterling of the net current assets of overseas subsidiaries. Trading profit fell to £327m (£455m in 1974) yielding a net profit of £191m (£243m) after such items as tax, minority interests, development grants and extraordinary items. Some £132m (£189m) is to be retained in the business and a final dividend of 4.875p per £1 unit of ordinary stock is to be recommended.

Commenting on the figures, the company says that the low level of economic activity throughout the world resulted in a marked reduction in volume of sales, although the total value increased because higher average selling prices more than offset the effects of the reduction, profits were lower because of the combined effect of reduced volume and substantially higher costs which could not be fully recovered in selling prices.

BAT's cosmetics business described as 'patchy'

British-American Tobacco Co Ltd expect another modest improvement in the overall results of their cosmetic businesses in the coming year.

Sir Richard Dobson, chairman, considers these expectations "highly creditable in all the circumstances". Describing the cosmetics picture as "patchy", he said: "With the existing curbs on purchasing power Yardley in this country is finding

business more difficult than in the last few years, during which it grew spectacularly. Lenthéric-Morny, however, looks like having another very good year."

Total sales of the division at £71m were up by £15m or 26 per cent on those of the previous year and operating profits rose by 22 per cent. Results apply to the year ended June 30, 1975, as it is considered impracticable to prepare accounts at September 30 in the seasonal industry. BAT group as a whole achieved a turnover of £4,261m in the year to September 30, 1975 (£3,488m the previous year). Profit before tax reached £276m (£249m) and net assets £1,742m (£1,442m).

In the UK, Yardley and Lenthéric-Morny both successfully overcame difficulties caused by packaging and raw materials shortages during the second half of 1974. Sales and profits showed an improvement although profit growth was restricted by inflation and Government price control.

In North America, Germaine Monteil is doing well, according to Sir Richard, but it was a difficult year for Yardley with retailers severely restricting buying to reduce stocklevels. However, Yardley's results in Brazil, Columbia and Venezuela were all encouraging.

Cyclax, acquired in the final quarter of the previous year, has progressed satisfactorily and sales increased in its principal markets. Other cosmetic houses in the division are Scandia and Tuvaché.

Kodak sales hit

Price increases alone were responsible for the 11.9 per cent rise in sales by Kodak Ltd last year.

In his annual statement last week, Mr J. Moorfoot, chairman and managing director, notes that sales by Kodak and its subsidiaries reached £145.7m in 1975, compared to £130.2m in 1974. UK exports were up by 12.5 per cent to a record £44.6m. However, the volume of products sold fell below that for 1974, with price increases accounting for the rise in the value of sales. Earnings before tax fell 25.2 per cent from £24.4m to £18.3m, yielding £8.9m after tax—down 19.5 per cent.

Home sales were adversely affected by the depressed state of the market and factors such as the imposition of the 25 per

cent VAT rate. Mr Moorfoot says that the problems exacerbated the already serious under-utilisation of capacity of certain areas at Stevenage, Kirby, and colour processing plants; it was decided to run down those areas as well as reducing inventories, staff levels and energy costs.

Kodak's authorised share capital was increased during the year from £21m to £50m by capitalising reserves of £29m and issuing shares of that value to the US parent company. Some £8.75m was invested in new facilities in 1975 and the capital expenditure budget for this year is £10m—the largest single item of which is the purchase and initial preparation of a new 550 acre site at Annesley, Nottingham, to be developed over 25 years.

Polaroid now manufacture pharmaceutical chemicals

Polaroid entered the fine chemical supply business last year, with its Perkin Chemical Division in the USA synthesizing chemicals for sale to the pharmaceutical industry in addition to manufacturing the large volume of chemicals required to meet the company's own needs.

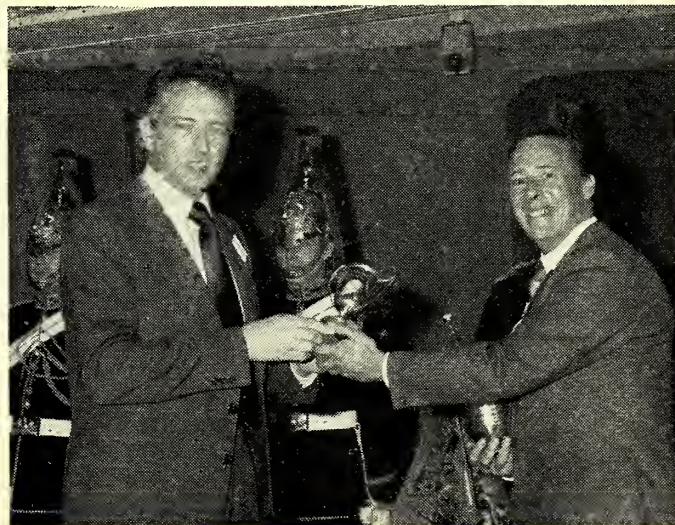
That is revealed in a statement from Mr W. J. McCure Jr, president, Polaroid Corp, which was issued last week. Mr McCure adds: "Although this business is a small part of our total volume, we believe it will increase in 1976, and we feel there are a number of opportunities for us in the proprietary chemicals field." The company now also makes all the colour negatives used in its products, as well as manufacturing all the flat batteries used in the SX-70 film pack.

In line with Mr McCure's previous announcement that sales were booming (C&D January 24, p116), the statement says the company's performance in 1975 was its best for five years, with record sales on both US domestic and international operations. Worldwide sales for the year were \$812.7m—a 7 per cent increase in the 1974 figure of \$757m—yielding net earnings after tax of \$62.6m—more than 120 per cent above the previous year's \$28.4m and the highest for any year since 1970.

Mr McCure comments: "We are pleased with the results of 1975 and encouraged about the prospects for the future".

More Company News on p312

Peter Waine (right), deputy managing director, Smith & Nephew, presents an engraved silver tankard to Alan Shoesmith, key accounts representative, Norwich, who was voted salesman of the year 1975. A similar presentation was made to David Dillon southern area representative, the salesman who had shown the most outstanding development



Company news

Continued from p311

Briefly

Valstock Valuers are moving on March 1 to 63 Kenton Avenue, Southall, Middlesex UB1 3QG (telephone 01-574 7585).

Johnson & Johnson, USA, is to instal an industrial complex at Sumare in Sao Paulo State, Brazil, for the manufacture of basic materials and synthetic chemicals for use by the pharmaceutical industry.

World sales of **CIBA-Geigy** group fell 3 per cent to 9,040m Sw frs (£1,700m) in 1975. Despite a reduction in operating profit, dividend is unchanged. Turnover for pharmaceuticals rose by 4 per cent to 2,560m Sw frs.

Merck, Sharp & Dohme, USA, have recently opened a 45m sucre pharmaceutical plant in Ecuador. Four other companies, **Hoechst** and **Schering-Bayer**, Germany, and **Warner Chilcot-Parke Davis** and **Schering Corp, USA**, have also started to make pharmaceutical products in Ecuador, where the Government hopes to replace US\$16m worth of imports by home-made products in the current year.

Appointments

Procter & Gamble: Mr D. S. Hudson has joined the board and Mr R. S. Burnett is to become director of corporate affairs at Procter & Gamble France.

Smith, Kline & French Laboratories Ltd: Dr Robert F. White, PhD, BPharm, MPS, head of production division, has been elected to the board. He has been with the company for 15 years.

Houbigant Ltd have appointed Mr John Chapman to the newly created position of sales manager, co-ordinating the Houbigant sales force. Prior to joining Houbigant Mr Chapman was with Faberge and Shulton franchise division.

Armour Pharmaceutical Co Ltd have appointed Mr A. R. Jefferies financial controller and Mr A. J. Powell management accountant. Six new medical representatives have completed their basic training courses and will be joining their territories—Mr A. Dogra (Bradford), Mr G. Fitzpatrick (Dublin), Mr H. Hamilton (Dunbartonshire/part Glasgow/Sterling), Mr D. Muddle (Salisbury/Bournemouth), Mr K. Rowley (South-west London), and Mr T. Wallis (Leeds/Harrogate).

Firmenich Group: On May 1, Mr D. Richard Ensor takes up the position of vice-president, commercial, flavour division, with the American company situated at Princeton, New Jersey. Mr Geoffrey W. Sonley, who for the past 12 years has been with Firmenich Australia and since 1970 held the position of general sales manager, joins Firmenich London on March 1. Mr Sonley's new appointment as deputy managing director will embrace responsibilities for all sales and marketing activities with the UK.

Market News

Barbiturates dearer again

London, February 25: Barbiturates were sharply advanced in price on Monday. The rise was the second for barbiturates to take place in under six months. The increases varied according to the product and ranged from just under £1.00 kg in the case of amylobarbitone to £1.60 for phenobarbitone. Before the previous increase, which occurred in mid-September 1975, phenobarbitone was available at £7.45 kg; now it is £9.19. Metol also advanced this week by £0.40 kg.

Business was subdued in spices; cloves and cumin seed provided the only features by their firm tone. Cardamoms (Alleppy green and seeds) were also dearer. In botanicals, senega and valerian root were lower but Peru balsam and cherry bark were advanced.

Among essential oils, cinnamon leaf was again being offered on the spot following lower-priced offers from origin. Petitgrain was down by £0.10 kg.

Pharmaceutical chemicals

Amylobarbitone: Less than 100-kg lots £7.66 kg; sodium £8.91.
Butobarbitone: 50-kg lots £9.99 kg; sodium £10.98.
Butobarbitone: Less than 100 kg £9.48.
Cyclobarbitone: Calcium £9.53 kg in 25-kg lots.
Magnesium carbonate: BP per 1,000 kg; heavy £454. Light £338.
Magnesium dihydrogen phosphate: Pure £1.5725 kg in 50-kg lots.
Magnesium hydroxide: (metric ton) BPC light £950; 28 per cent paste £360.
Magnesium oxide: BP per 1,000 kg heavy £1,304; light £950.

Coming events

Monday, March 1

East Metropolitan Branch, Pharmaceutical Society, Churchill Room, Wanstead Library, at 8 pm. Dr A. E. Dormer (consultant physician, Whipps Cross Hospital) on "The use and misuse of antibiotics".
Socialist Medical Association, Headland House, 308 Gray's Inn Road, London WC1, at 7 pm. Pharmacy group annual meeting.
Stockport Branch, Pharmaceutical Society, Alma Lodge Hotel, Stockport, at 8 pm. Mr R. James on "Diseases of famous men".

Tuesday, March 2

Cambridge Branch, Pharmaceutical Society, Owen Webb House, Gonville Place, Cambridge, at 8 pm. Mr T. Astill (deputy secretary, National Pharmaceutical Union) on "Some legal pitfalls in running a pharmacy".
Enfield Pharmacists' Association, 36 Chase Green Avenue, at 8 pm. Pancake party (tickets from Mrs D. Wade at the above address).
Lanarkshire Branch, Pharmaceutical Society, Nurses' recreational hall, Strathclyde Hospital, at 7.30 pm. Mr S. Blum (secretary GPP section, steering committee, ASTMS) on the aims and membership of the section.

Wednesday, March 3

Chelmsford Branch, Pharmaceutical Society, Saracen's Head Hotel, Chelmsford, at 7.30 pm. Mr M. Gordon (a member of Council) "Let's talk".
Liverpool Branch, Pharmaceutical Society, St

Magnesium sulphate: (ex-works, per metric ton) BP from £73.00 metric ton; commercial £64.00; exsiccated £196.40.
Magnesium trisilicate: £528 metric ton.
Metol: Photo grade per kg, 50-kg lots £5.64; 250-kg £5.46.
Pentobarbitone: Less than 100-kg £12.39 kg; sodium £13.40.
Phenobarbitone: In 50-kg lots £9.19 kg; sodium £10.05.
Quinalbarbitone: Base and sodium in 25-kg lots £11.74 kg.

Crude drugs

Agar: Spanish-Portuguese £4.95 kg spot.
Aloes: Cape £0.93 kg spot; £0.92, cif. Curacao £1.40 spot nominal; £1.29, cif.
Balsams: (kg) **Canada:** £13.85 spot; £13.60, cif. for shipment. **Copaiba:** BPC £1.55 spot; £1.50, cif. **Peru:** £4.20 spot; £3.95, cif. **Tolu:** £3.15 spot.
Belladonna: (metric ton) Leaves £1,550, cif. Herb £650, cif. Root no offers.
Benzoine: BP £66.00-£68.00 cwt spot; £61.00-£65.00, cif.
Buchu: Rounds £2.45 kg spot; £2.20, cif.
Cardamoms: (per lb cif), Alleppy green No 1 £2.65; prime seeds £2.55.
Cherry bark: Spot £575 metric ton; £565, cif.
Chillies: Mombassa £755 ton, cif.
Cinnamon: (cif) Seychelles bark £320 ton, cif.
Cloves: Madagascar £2,850 per ton, cif.
Dandelion: No spot; shipment £1.02 kg, cif.
Gentian: Root: £1.48 kg spot; £1.40, cif.
Russian: £240 spot; £230, cif. Block juice £1,130. Spray-dried £1,050.
Ginger: (ton, cif) Cochin £540; Jamaican spot £930. Nigerian split £415, peeled £540. Sierra Leone (March-May) £650.
Ipecacuanha: (kg) Costa Rica £3.65 spot; £3.55, cif.
Kola nuts: No spot; £195 metric ton, cif.
Liquorice root: Chinese £190 metric ton, cif.
Menthol: (kg) Brazilian spot £8.90 kg; forward shipment £8.60, cif. Chinese spot duty paid £10.00; shipment £9.00, cif.
Pepper: (ton) Sarawak black £810 spot; £730, cif. white £1,010; £925, cif.
Seeds: (metric ton, cif) Anise: China star forward £450. Caraway: Dutch £365. Celery: Indian £350. Coriander: Moroccan £270. Cumin: Indian £600. Turkish £520. Dill: Indian £175. Fennel: Indian new crop £315. Fenugreek: £115.
Senega: Canadian £11.10 kg spot; £10.70, cif.
Tonquin beans: Spot £0.92½ kg; shipment £0.84, cif.
Valerian: Indian root £750 metric ton spot; shipment £700, cif.

Essential oils

Cinnamon: Ceylon leaf spot £3.45 kg; forward £2.90, cif.
Lemongrass: Afloat £3.85 kg; £3.45, cif.
Petitgrain: £4.50 kg spot.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

George's Hotel, Liverpool, at 7.30 pm. Annual dinner and dance.

Scottish Department, Pharmaceutical Society, 36 York Place, Edinburgh, at 7.45 pm. Mr R. S. Morrison (vice-chairman, Scottish Executive) on "Pharmaceutical practice in the Commonwealth and USA".

Sheffield Branch, Pharmaceutical Society, Chemistry lecture theatre 1, Sheffield University, at 8 pm. Mr T. Sage on "Over the Alps by balloon".

Royal Society for the Prevention of Accidents. National Home Safety Conference, Pavilion Ballroom, Bournemouth, March 3-4 (£15). Details from conference officer (home safety division), RoSPA, Royal Oak Centre, Brighton Road, Purley, Surrey CR2 2UR.

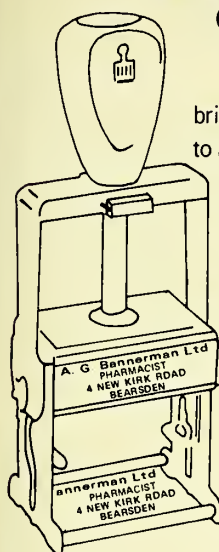
Thursday, March 4

Chiltern Region, Pharmaceutical Society, Luton Esso Hotel, at 8 pm. Dr Magnus Pike (secretary, British Association for Advancement of Science) on "Nutrition and the chemist's shop".
Shropshire Branch, Pharmaceutical Society, Hawkstone Park Hotel, Weston-under-Redcastle, Hodnet, at 7.30 pm. Mr R. Jagoe (Shropshire Conservation Society) on "Conservation in Britain and Shropshire", preceded by dinner.

Friday, March 5

Harrow Branch, Pharmaceutical Society, Northwick Park Hospital, at 8 pm. Wine and cheese party.
Hastings Branch, Pharmaceutical Society, Postgraduate medical centre, Royal East Sussex Hospital, at 8 p.m. Mr R. M. L. Gander (assistant secretary, Chemists' Mutual Insurance Co Ltd) on "Insurance for pharmacists".
Huddersfield Branch, Pharmaceutical Society, Greenhead Masonic Hall, Greenhead Road, at 7 pm. Annual dinner and dance.

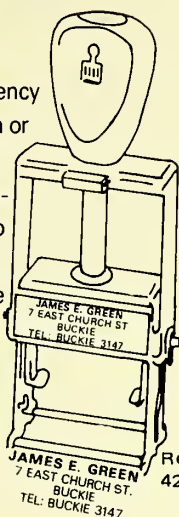
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DEPARTMENT OF HEALTH IRELAND

MARKETING OF PROPRIETARY MEDICINAL PRODUCTS

The Minister for Health has made further regulations extending controls over the marketing of proprietary medicinal products in harmony with the directive adopted by the EEC. These regulations are:

The European Communities (Proprietary Medicinal Products) Regulations, 1975.

They extend to proprietary medicines which were already on the market before 1st October, 1974—the date on which the initial scheme was introduced—a system of licensing. These products will be licensed in a phased scheme which will be completed in 1983, beginning with anti-infectives, tranquillisers, hypnotics and sedatives which, with effect from 1st April, 1977, may not be on the market here unless they are authorised by the Minister for Health.

Pharmaceutical companies intending to continue the marketing of **ANTI-INFECTIVES, TRANQUILLISERS, HYPNOTICS** or **SEDATIVES** should send applications to the Drug Division, Department of Health, as soon as possible and before 1st August, 1976 to avoid interruption of marketing arrangements.

Notes on applications for authorisation may be obtained from the

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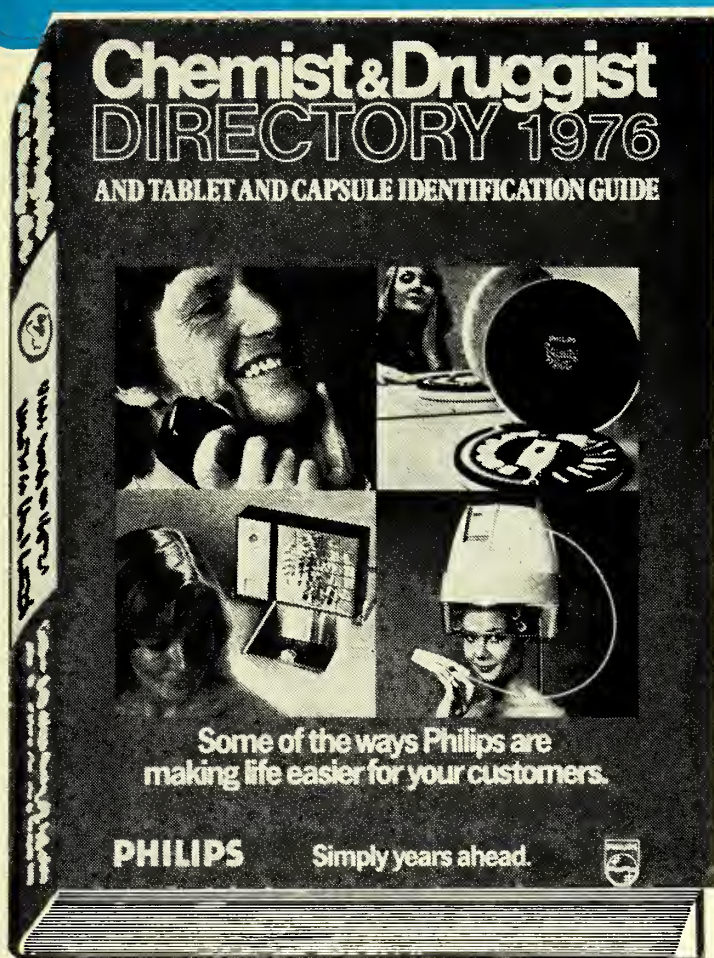
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DIRECTORY 1976



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	Normal RSP	APOCAIRE RSP		Normal RSP	APOCAIRE RSP
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CAMAY SOAP BATH	18½p	15p	PALMOLIVE SHAVE		
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** Smaller sizes available too!*

**APHRODISIA 33
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APPROX. 15% OFF.
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**A WILKINSON
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e.g. 4 doz. CAMAY BATH
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FULL DETAILS SUPPLIED FROM YOUR LOCAL SANGERS BRANCH

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BARTEX 1976

polarised sunglasses



***Profit from the
extensive **BARTEX**
advertising campaign
for 1976***

On the buses

On the radio

In the press



PL180 Six assorted
coloured frames, 12 pieces
per display box.
Retail £1.00 each

***“Profit from
BARTEX
sunglasses”***



PL494/5/7 Three assorted shapes
with assorted coloured frames.
Retail £1.50 each

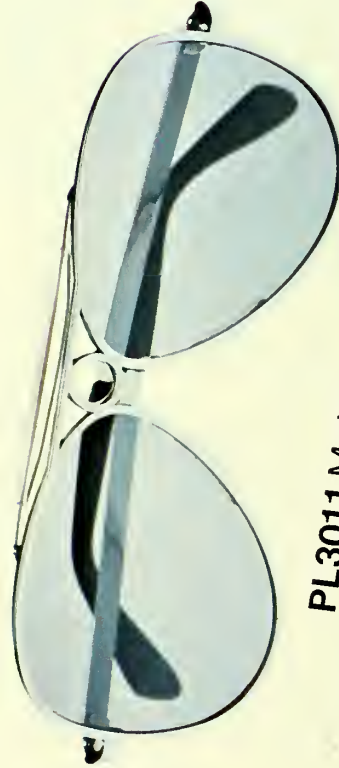


PL3002 Metal frames
in nickel and gilt.
Retail £1.50 each



PL3005 Metal frames
in nickel and gilt.
Retail £1.50 each

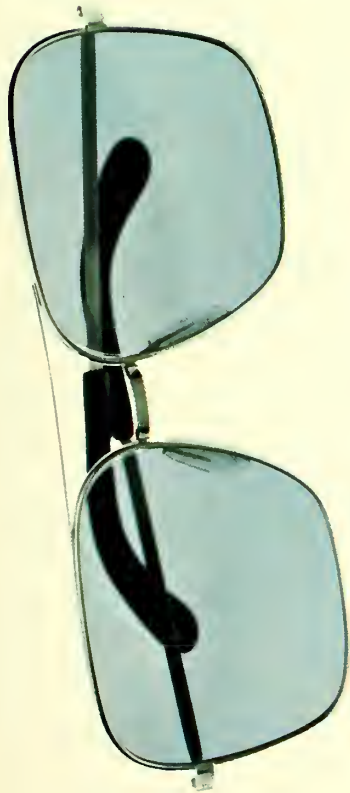
**“Sell BARTEX
polarised sunglasses
and make profits”**



PL3011 Metal frames
in nickel and gilt.
Retail £1.50 each



PL10175 Metalised
chromed frames.
Retail £1.80 each



PL1052 Metal frames in
nickel and gilt.
Retail £2.00 each



PL1054 Metal frames in
nickel and gilt.
Retail £2.00 each

**“BARTEx polarised
sunglasses still carry
a 100% money back guarantee”**



PL3015 Metal frames in
nickel and gilt.
Retail £2.00 each



PL3016 Metal frames in
nickel and gilt.
Retail £2.00 each

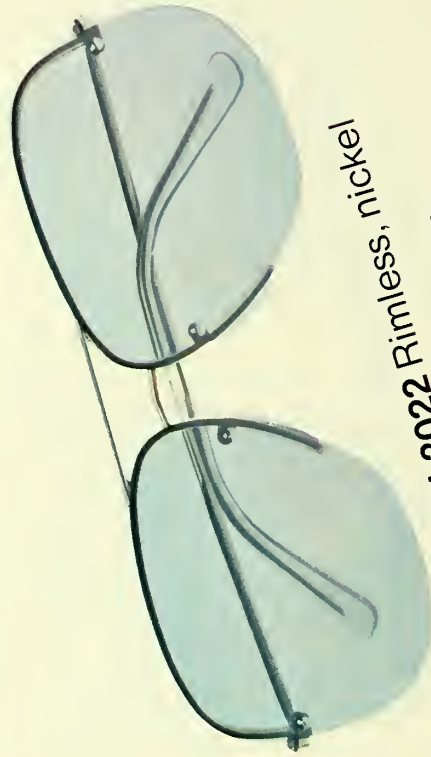


**PL14 Metalised
chromed frames.
Retail £2.00 each**

***“BARTEX
advertising will
support your sales”***



**PL3021 Rimless, nickel
and gilt.
Retail £2.75 each**



**PL3022 Rimless, nickel
and gilt.
Retail £2.75 each**



'76 face of fashion
Barter
sunglasses

childrens fashion



670

Children's polythene, two styles, carded
1 doz.

Retail 10p each



671

Children's pilot shape, plastic lens,
asstd. colours.

Retail 10p each



672

Children's round eye, plastic lens,
asstd. colours.

Retail 10p each



673

Children's plastic frames, acetate lenses,
6 asstd. shapes, asstd. colours.

Retail 18p each

Barter value



674

Ladies'/Men's shield shape, plastic lens, pin hinge, asstd. colours.

Retail 15p each



675

Men's style, Rayban bridge, plastic lens, pin hinge, asstd. colours.

Retail 15p each



676

Ladies'/Men's style, Rayban bridge, plastic lens, pin hinge, asstd. colours.

Retail 15p each



677

Men's wrap around, plastic lens, pin hinge, asstd. colours.

Retail 15p each



678

Men's style, pin hinge, shell only.

Retail 40p each



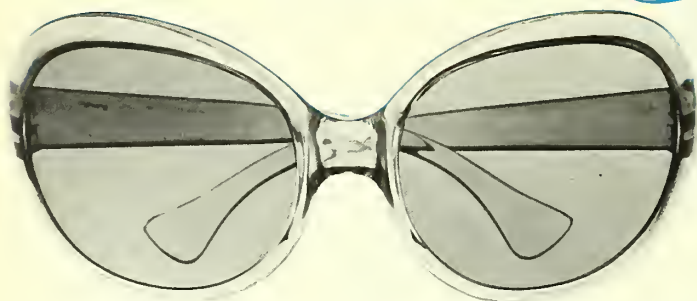
679

Ladies' style, pin hinge, gradient frame, asstd. colours.

Retail 45p each

Prices do not include VAT

Barter fashion



6710

Ladies' style, pin hinge, gradient frames, asstd. colours.

Retail 45p each



6711

Men's style, pin hinge, plastic lens, shell only.

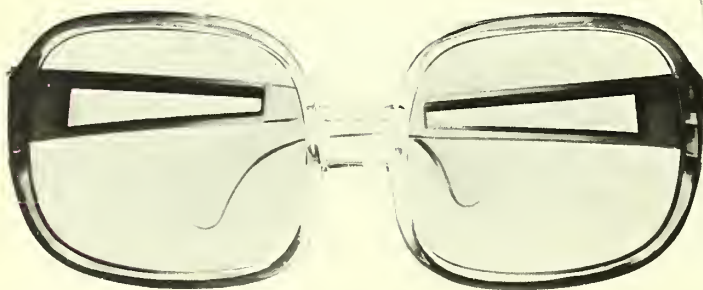
Retail 45p each



6712

Ladies' style, pin hinge, plastic lens, 3 asstd. shapes, asstd. colours.

Retail 55p each



6713

Men's browline, pin hinge, metal branch.

Retail 55p each

Prices do not include VAT

the mirror look



6714

Men's style, mirror lens, pin hinge,
asstd. black and shell, 3 asstd. shapes.

Retail 60p each



6715

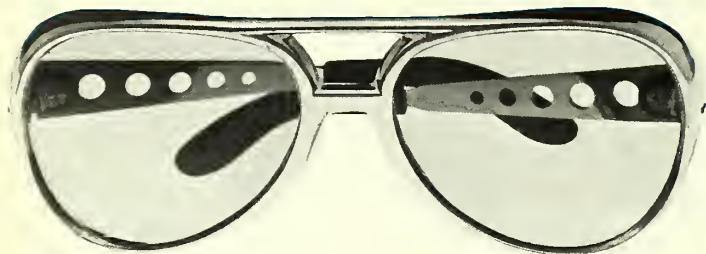
Ladies' style, mirror lens, pin hinge,
asstd. black and shell, 2 asstd. shapes

Retail 60p each



Prices do not include VAT

Barter quality



6716

Pilot shape, R/T branches,
metallised frames, chrome only.

Retail £1.00 each



6717

Metal frames, nickel and gilt, tempered
lens.

Retail £1.00 each



6718

Metal frames, nickel and gilt, tempered
lens.

Retail £1.00 each



6719

Metal frames, nickel and gilt, tempered
lens.

Retail £1.00 each

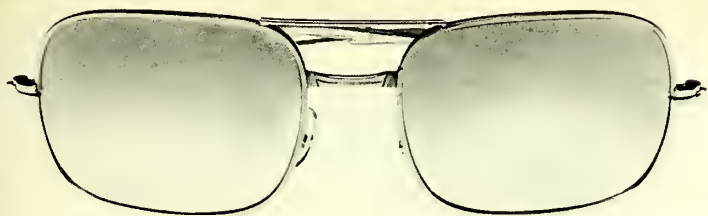


6720

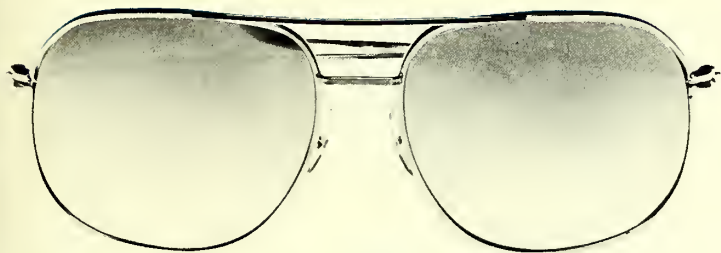
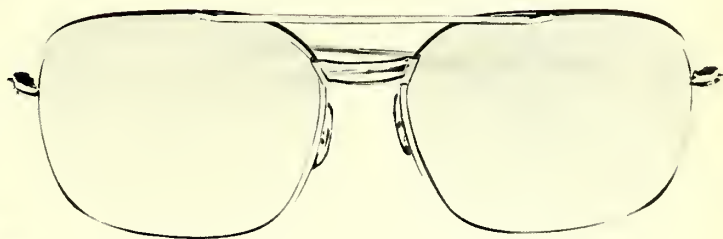
Men's browline, tempered lens, metal
hinge, black and shell asstd.

Retail £1.00 each

Prices do not include VAT



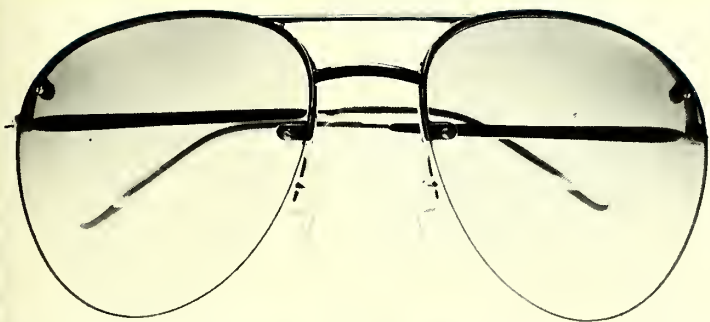
mirrored



6721

Metal frames, mirrored tempered lenses, 3 shapes asstd., nickel and gilt.

Retail £1.25 each

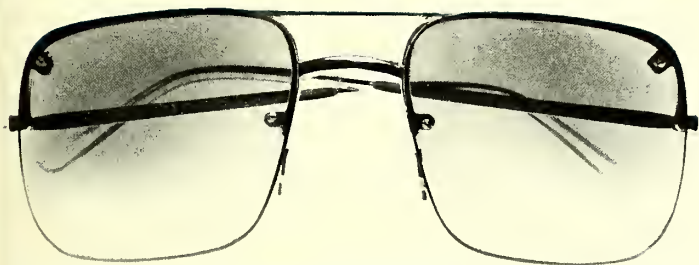


6722

Unisex style rimless, dégradé lens.

Retail £1.50 each

dégradé



6723

Unisex style rimless, dégradé lens.

Retail £1.50 each

clipovers



10053 Medium
10054 Small
10055 Large

Retail 25p each



M1A
M1B
M1C

Retail 50p each

Prices do not include VAT

stands



1. This beautiful display stand supplied free of charge with an assortment of Bartex Fashion Sunglasses, value £75 to the retailer.

Prices do not include VAT

Trade Discount Usual trade discounts to wholesalers are allowed.

Cases Available on request



2. This stand is supplied free with either of the following selection of Bartex Clipovers:

Selection "A" Price to Public

½ dozen assorted
Polarised Flip Clips £1.20 each

1 dozen assorted
Polarised Clipovers £1.20 each

8 dozen M1 Bartex Clipovers
(3 doz. A, 2 doz. B, 3 doz. C) £0.50 each

(Total 9½ doz.)

Price to retailer £46.40

Selection "B"

12 dozen M1 Bartex
Clipovers £0.50 each

(4 doz. A, 3 doz. B, 5 doz. C)

Price to retailer £48.00

Alfred Franks & Bartlett Co. Ltd.

Bartex House, 167-185 Freston Road, London W10 6TH. Tel: 01-960 0922/8.



ALFRED FRANKS & BARTLETT CO. LTD.,

BARTEX HOUSE, 167-185 FRESTON ROAD, LONDON, W10 6TH

TELEPHONES: 01-960 0922/8

TELEGRAMS: ALFRANKO, LONDON, W10

From

Date

Delivery

ALL PRICES EXCLUDE V.A.T.

REFERENCE No.	QUANTITY	RETAIL PRICE	REFERENCE No.	QUANTITY	RETAIL PRICE
	POLARISED			FASHION	
PL 10133		£0.50 each	670		£0.10 each
PL 10306		£0.50 each	671		£0.10 each
PL 180		£1.00 each	672		£0.10 each
PL 494/5/7		£1.50 each	673		£0.18 each
PL 3002		£1.50 each	674		£0.15 each
PL 3005		£1.50 each	675		£0.15 each
PL 3011		£1.50 each	676		£0.15 each
PL 10175		£1.80 each	677		£0.15 each
PL 14		£2.00 each	678		£0.40 each
PL 1052		£2.00 each	679		£0.45 each
PL 1054		£2.00 each	6710		£0.45 each
PL 3015		£2.00 each	6711		£0.45 each
PL 3016		£2.00 each	6712		£0.55 each
PL 3021		£2.75 each	6713		£0.55 each
PL 3022		£2.75 each	6714		£0.60 each
FLIP CLIPS			6715		£0.60 each
Ready assorted		£1.20 each	6716		£1.00 each
CLIPOVERS			6717		£1.00 each
Small		£1.20 each	6718		£1.00 each
Medium		£1.20 each	6719		£1.00 each
Large		£1.20 each	6720		£1.00 each
DISPLAY STANDS			6721		£1.25 each
Pack 67		£45.00 each	6722		£1.50 each
Mirror Top "C"		Free (see brochure)	6723		£1.50 each

Cases available on request.

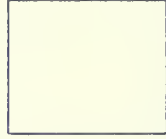
LESS USUAL TRADE DISCOUNTS

WITHOUT OBLIGATION

Please state whether pieces or dozens

CLIPOVERS		
MIA Small		£0.50 each
MIB Medium		£0.50 each
MIC Large		£0.50 each
10053 Medium		£0.25 each
10054 Small		£0.25 each
10055 Large		£0.25 each
DISPLAY STANDS		
Selection A Clipover		£69.60
Selection B Clipover		£72.00
Mirror Top No. 1 Stand		Free (see brochure)

THIRD FOLD AND TUCK IN



**Alfred Franks & Bartlett Co. Ltd.,
Bartex House,
167—185 Freston Road,
London, W10 6TH.**

FIRST FOLD

SECOND FOLD



PL10133 Polarised for boys,
assorted coloured plastic
frames.
Retail £0.50 each



PL10306 Polarised for girls,
assorted coloured plastic
frames.
Retail £0.50 each

**“The BARTEX range
is backed
by powerful advertising”**



PL/Clipovers Bartex
Polarised 1-piece clipovers
available in 3 sizes. Complete
in protective case.
Retail £1.20 each



Flip-Clips Bartex Polarised,
complete in protective case.
Retail £1.20 each

Display Stands

Your Bartex Sunglasses will sell themselves with these eye-catching sales aids which are ideal for window or counter displays.

A This attractive counter display pack, with selected assortments of 2 dozen polarised sunglasses, as follows, is supplied free.

Pack 67 contains 4 each PL3002, PL3005, PL3011, 2 each PL1052, PL1054, PL3015, PL3016, PL3021, PL3022.

Price to retailer £30.00.

B The box that provides your customer with his 100% money back guarantee, without affecting your profits.

C This stylish mirror top display stand is supplied **free of charge** with a full assortment of Bartex polarised sunglasses and clipovers to the value of £75 to the retailer.

D Bartex polarised test filter.



A



C



B



D

Alfred Franks & Bartlett Co. Ltd.,
Bartex House, 167-185 Freston Road,
London W10 6TH.
Telephone: 01-960 0922/8.

A

Prices do not include VAT

